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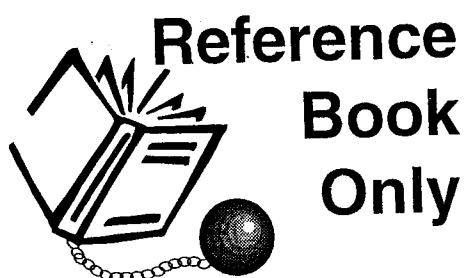
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# **An Evaluation of the Gay and Lesbian Youth Support Services (GLYSS) in Halton and Warrington**

**Catherine Perry  
Miranda Thurston**

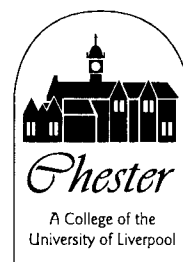


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(GLYSS) in Halton and Warrington**

**Catherine Perry  
Miranda Thurston**

**March 2001**

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## Summary

### Background

The Gay and Lesbian Youth Support Services (GLYSS) in Halton and Warrington is a collaborative multi-agency project involving Youth, Health, Education and Social Services. It is run on a day-to-day basis by the Development Worker for Lesbian, Gay and Bisexual Youth. The project has provided a telephone enquiry service and a One-to-One Support Service for young lesbian, gay and bisexual people, a resource loan service, and set up two Youth Groups, one in Halton and one in Warrington. In addition the project has provided a telephone enquiry and resource loan service for professionals and parents, and education and training for other agencies.

### Aims

This study was designed to evaluate the work of the GLYSS project. The aims were to:

- analyse data collected routinely by the GLYSS Development Worker on uptake of services;
- explore the perceptions of the GLYSS project held by various stakeholders in GLYSS;
- assess the extent to which the GLYSS project was making progress towards its own stated aims.

### Study design and methods

In this study a pluralistic approach to evaluation and both quantitative and qualitative methods were utilised in order to give a broad overview of the GLYSS project. These included:

- retrospective analysis of data that had been collected by the GLYSS Development Worker about the activity of the GLYSS project;
- semi-structured interviews with young people attending the GLYSS Youth Groups;
- semi-structured interviews with other stakeholders in the GLYSS project, including a cross-section of individuals to represent the services involved in the GLYSS inter-agency collaboration, members of the GLYSS Management Group, representatives from agencies who have worked with the GLYSS project on

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particular ventures, and parents of young people who have used the GLYSS project services.

### **Main findings and conclusion**

The GLYSS project had successfully met its aim of contacting young lesbian, gay and bisexual people. Young people used the telephone service, the One-to-One Support Service and the Youth Groups, and it was evident from the range of issues around which they requested help and advice that multiple and complex needs were expressed. Young people identified the Youth Groups as a way of addressing isolation, and as a source of relevant information concerning issues pertinent to their sexuality. The GLYSS project had also met its aim of working with the Youth Service and other agencies. The telephone enquiry and resource loan service were used by individuals representing different agencies both locally and nationally, and training courses had been successfully facilitated. The professionals interviewed perceived the project to have been a success in terms of its aims, and in addition the themes of the avoidance of adverse publicity and the GLYSS project as innovative and well-run emerged from the interview material. In addition, a tension between mainstream and 'specialist' service provision was identified by the young people and the professionals.

The GLYSS project has not been so successful at a policy level, partly because of the timescale required to bring about the 'cultural' changes perceived to be necessary to sustain this area of work, and partly because of the context within which the project was operating. Many of the barriers to the work of the project are well-documented areas of difficulty in inter-agency working, problems which, in this case, were compounded by the controversial nature of work around sexuality and young people in the context of Section 28. Due to the problematic nature of funding the GLYSS project as a specialist service, it is probable that unless the work becomes mainstream and time is allowed for cultural change to occur, issues around young lesbian, gay and bisexual people will not stay prominently on the agenda.

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## Chapter 1 Introduction

The Gay and Lesbian Youth Support Services (GLYSS) in Halton and Warrington is a collaborative multi-agency project involving Youth, Health, Education and Social Services. Representatives from these areas sit on the GLYSS Management Group, and the project is run on a day-to-day basis by the Development Worker for Lesbian, Gay and Bisexual Youth. The project has provided a variety of services. For young lesbian, gay and bisexual people there has been a telephone help-line, a One-to-One Support Service, a resource loan service, and two Youth Groups have been set up, one in Halton and one in Warrington. For professionals, the project has provided a telephone enquiry line, a resource loan service, and education and training programmes. In addition the GLYSS Development Worker has been available for consultation by professionals who have been able to refer young people to the project, and has worked on collaborative projects with other agencies.

This study, commissioned by the GLYSS project, was designed to evaluate the work of the project. The aims were to:

- analyse data collected routinely by the GLYSS Development Worker on uptake of services;
- explore the perceptions of the GLYSS project held by various stakeholders in GLYSS;
- assess the extent to which the GLYSS project was making progress towards its own stated aims.

This report presents the findings of the work. Firstly however, in Chapter 2, the study is placed in context by reviewing the literature on some of the background issues to the GLYSS project. The experiences of young lesbian, gay and bisexual people in western society, the provision of services for this group, and inter-agency working, are all explored. Chapter 3 focuses on the GLYSS project as a case study, and is a factual account of the development of the project. Chapter 4 describes the approach taken to the evaluation. In Chapter 5 the results are presented, and in Chapter 6 the findings are discussed and key conclusions drawn.

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## Chapter 2 Background

### 2.1 Introduction

The lesbian and gay population is largely hidden because of the nature of the oppression which this group experiences (Platzer and James, 1997), but projections of the prevalence of homosexuality in adult men and women range from 1%-10% (Remafedi et al, 1992, cited in Kreiss and Patterson, 1997). There are no official estimates of how many of Britain's secondary school pupils are lesbian, gay or bisexual, but even the lowest estimates indicate that lesbian, gay and bisexual people must constitute a significant minority of the population (Burton, 1995). The uncertainty about the size of the young lesbian, gay and bisexual population, and its 'hidden' nature, can present problems when researching this group, but there is evidence to suggest that young lesbian, gay and bisexual people have some difficult experiences.

### 2.2 The experience of young lesbian, gay and bisexual people

Adolescence is a challenging stage in the human life span (Kelly, 1996; Nesmith et al, 1999), and is a stressful time for many young people (Coenen, 1998). During this period,

'in the midst of developing an understanding of identity, social skills and self-esteem, a growing awareness of one's internal sense of sexuality emerges' (Nesmith et al, 1999, p. 96).

There can be particular problems for young lesbian, gay and bisexual people who may perceive their emerging identity to be unacceptable to the world of peers, parents and school (Kelly, 1996; Zera, 1992). Contemporary western society has been described as 'deeply homophobic' (McColl, 1994, p.550), and it can be argued that lesbian, gay and bisexual adolescents are

'an oppressed group discriminated against by universal social institutions such as the family, social culture, and educational setting' (Morrow, 1993, p.655).

Many of the issues and concerns raised by and about lesbian, gay and bisexual young people are created by the attitudes and actions of other members of society (Burton, 1995; Gonsiorek, 1988, in James, 1998). The experience of prejudice and of being perceived deviant can have a profound impact on all aspects of the life and health of

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young lesbian, gay and bisexual people (Meyer, 1995, in Robertson, 1998). As Zera (1992) states

'the unique task for these adolescents is to achieve a positive gay identity while adjusting to what is currently a socially stigmatised role' (Zera, 1992, p.852).

Many young lesbians and gay men experience isolation, fearing negative attitudes of peers and feeling unable to approach either teachers or parents for support (Borhek, 1988, in Rivers, 1995a; Grossman and Kerner, 1998; Morrow, 1993; Perry, 1999; Peters, 1997). D'Augelli et al (1998) state that many young lesbian, gay and bisexual people find it very difficult to disclose their sexual orientation to their family, for example, only 9% of the respondents in their study of 194 lesbians, gays and bisexuals first disclosed to a parent. In another study of lesbian, gay and bisexual young people, Nesmith et al (1999) found that young people were more likely to feel supported in their sexuality by non-family members than by family members. Disclosing a lesbian, gay or bisexual identity to peers is not necessarily easy either however. During adolescence young people attach much importance to acceptance by peers (van Beest and Baerveldt, 1999), and peer group acceptance is arguably crucial to healthy identity formation and social development (Morrow, 1993; Rivers, 1995b). Being labelled as 'gay' by peers can be very damaging for young people even if the identity is valid (Rivers, 1995a). Gay, lesbian and bisexual young people may isolate themselves from their peers because of the fear of rejection (Morrow, 1993) or deny their sexual orientation by feigning interest in heterosexual relationships (Morrow, 1993; Rivers, 1995b). James (1998, p.448) states that

'social pressures (within peer groups, families, the media, schools, and all of the other contexts in which these youth (lesbian/gay/bisexual) live) contribute to their sense of isolation and inferiority'.

There is much evidence to suggest that lesbian and gay teenagers have a difficult time at school in the United Kingdom (Rivers, 1995a; Rivers 1995b). Bullying is a problem in many schools and has become a prominent issue (Smith, 2000). A large-scale study in England of 6700 pupils found that 27% of primary school pupils and 12% of secondary school pupils are bullied during the school term (Whitney and Smith, 1993). Some more recent work has suggested lower figures (Salmon et al, 1998), but as these studies were conducted in different schools Smith (2000) claims that it is difficult to draw definite

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conclusions about the extent of the problem. Rivers (1995a) states that there is a paucity of research concerning young people who are bullied because they are gay, or are perceived to be gay, by their peers, but the work that has been carried out suggests that homophobic bullying is a problem.

In 1984 a survey of 416 young lesbians and gay men in London revealed that 38% reported feelings of isolation at school, 32% reported being verbally abused and 19% reported being beaten up because of their sexuality (Warren, 1984). More recently a survey carried out by Stonewall indicated that 48% of lesbians and gay men aged under 18 had been attacked, half of these attacks involved fellow students and that 40% of these attacks had happened at school (Mason and Palmer, 1996). Homophobic abuse appears to be less common among teenage girls than teenage boys (Rivers, 1995a), and Askew and Ross (1992) claim that much of the bullying that occurs between teenage boys is homophobic in nature, as to be accepted by their peers boys have to prove their heterosexuality. Treatment of young lesbian, gay and bisexual people by school staff including teachers can also be problematic. Rivers (1995b) reported that 50% of 44 British lesbians and gay men who completed bullying questionnaires recalled being victimized by teachers because of their sexual orientation.

In a 1999 survey commissioned by the Terence Higgins Trust and Stonewall and carried out by the Institute of Education, 82% of teachers stated that they were aware of homophobic bullying, but only 6% of schools had policies that dealt with homophobia (Stonewall, 1999). The Department for Education and Employment (DfEE) have stated that 'schools need to be able to deal with homophobic bullying' (DfEE, 2000, p.13), and so this issue is clearly an area of current concern in the United Kingdom.

Sex and sexuality education at school is another issue likely to have an impact on young lesbian, gay and bisexual people. In America most school sex education does not give information about homosexuality as a normal variation of sexuality (Morrow, 1993). The situation in the United Kingdom is similar. The Health Education Authority acknowledges that young lesbian and gay adolescents are not likely to receive information about their sexuality or relevant sex information whilst at school (Kelly, 1996) and, in his review of the British literature, Mullen (1998) concluded that the sex education received by the

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majority of young lesbian, gay and bisexual people was poor quality and inappropriate. Ray (1998) claimed that young lesbians and gay men are particularly unsupported in terms of their developing sexualities.

In the United Kingdom much confusion and controversy has been engendered in schools regarding the teaching of homosexual issues because of the introduction of Section 28. Section 28 of the 1988 Local Government Act prevents local authorities from intentionally promoting homosexuality (Stonewall, 1999; Terrence Higgins Trust, 1999). In a study carried out by the Institute of Education, 61% of teachers felt that lesbian and gay issues should be dealt with by schools, but felt unable to do so themselves because of lack of official guidance, fear of criticism and confusion over Section 28 (Stonewall, 1999). However, Section 28 prohibits *local authorities* from promoting homosexuality and does not, it has been argued, apply to schools (Burton, 1995; Outrage, 1998). Central Government guidance states that all schools should provide knowledge about the nature of sexuality and that Section 28 should not prevent objective discussion of homosexuality in the classroom (Kelly, 1996). The 'Sex and Relationship Education Guidance' published by the DfEE states that

'Young people, whatever their developing sexuality, need to feel that sex and relationship education is relevant to them and sensitive to their needs. The Secretary of State for Education and Employment is clear that teachers should be able to deal honestly and sensitively with sexual orientation, answer appropriate questions and offer support' (DfEE, 2000, p.12).

Thus, there is no legal reason for excluding the discussion of lesbian, gay and bisexual issues in the school environment, and there is, arguably, a requirement that they should be addressed.

Many young lesbian, gay and bisexual people, or those questioning their sexuality, may also have to combat the negative feelings that they may have towards themselves (Grossman and Kerner, 1998; Rivers, 1995a). In the USA 'internalized homophobia' has been linked to a number of social and educational problems including educational under-achievement, domestic violence, alcoholism, substance abuse, eating disorders and a propensity to engage in unsafe sex (Rivers, 1995a).

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A common coping strategy for young lesbians and gay men has been the use of drugs and alcohol (Kreiss and Patterson, 1997). Mullen (1998) reviewed American and British research and it would appear that the use of alcohol and drugs is higher among the lesbian and gay community than in the general adolescent population, a conclusion that was also reached by Kreiss and Patterson (1997). It is not only that alcohol and drugs may be used as a coping strategy, but also that one of the only places for young lesbians and gay men to meet other lesbians and gay men has often been in bars (Kreiss and Patterson, 1997).

Gay adolescents have been found to be at disproportionately high risk of depression, suicide, and other psychosocial problems in comparison with heterosexual young people (Allen et al, 1998; Fergusson et al, 1999; Hershberger and D'Augelli, 1995; Kreiss and Patterson, 1997). In the American literature, Kreiss and Patterson report that 40% of lesbians and gay men have seriously attempted or considered suicide and that nearly all of these attempts occurred during teenage years. A report commissioned by the U.S. Department of Health and Human Services concluded that young lesbians and gay men were two to three times more likely to attempt suicide than other young people (McKenna, 1991). McColl (1996) reports on a British study in which 27 lesbian, gay and bisexual youth workers from 14 cities were asked about their knowledge of suicidal thoughts and behaviour in their client groups. It was estimated that 38% of young lesbians and 43% of young gay men had experienced serious suicidal thoughts, 18% of young lesbians and 17% of young gay men had made a suicide attempt, 21% of young lesbians and 22% of young gay men had engaged in parasuicidal behaviour and 24% of young lesbians and 18% of young gay men had engaged in other self-harm. The 1984 study by the London Gay Teenage Group (Warren, 1984) revealed that 19% of gay teenagers had tried to commit suicide.

It has been proposed in the past that the inherent psychopathology of lesbian and gay people predisposes them to suicidal behaviour, a view that has been discredited (Erwin, 1993). More recently it has been recognised that the social isolation and the internalisation of negative stereotypes experienced by this group can predispose towards self-destructive behaviour (Erwin, 1993). Robertson (1998) found that the majority of a sample of 37 gay men in a Scottish study felt isolated and miserable when



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they first experienced sexual feelings towards men. Disclosure of lesbian or gay identity to family commonly leads to parental rejection, at least initially (Borhek, 1988; Mattison and McWhirter, 1995 in Kreiss and Patterson, 1997). This can lead to the young person being made to leave the family home, or leaving voluntarily because of family discord, and could lead to depression or suicide (Robertson, 1998). Remafedi et al (1991, in Kreiss and Patterson, 1997) suggest that younger lesbian and gay people may be less able to cope with the isolation and stigma of a homosexual identity than older people. In support of this, Rivers (1995, p.382) states that

'it seems entirely feasible to suggest that the combined effects of being bullied at school together with the constant fear of parental or peer disclosure and an inability to deal with issues such as internalized homophobia identifies both lesbian and gay teenagers as a group at particular risk from self-destructive behaviour.'

McColl (1996) argues that intervention is needed to improve the self-esteem and end the isolation of young lesbian and gay people.

### **2.3 The provision of services and support for young lesbian, gay and bisexual people**

As young lesbian, gay and bisexual people may often perceive their emerging identity to be unacceptable to the world of peers, parents and school (Kelly, 1996; Zera, 1992) there is an apparent need for supportive youth services for this group (Nesmith et al, 1999). D'Augelli et al (1998, p.370) state that

'involvement with affirming lesbian, gay and bisexual community resources is crucial in helping youth to maintain self-esteem and learn effective coping strategies as they move toward adulthood.'

Grossman and Kerner (1998) claim that this kind of social support may moderate the effects of the isolation and self-hatred experienced by many young lesbian, gay and bisexual people.

Morrow (1993, p.657) states that in America there are few 'positive community supports' for lesbian and gay adolescents, a situation which is arguably very similar in the United Kingdom (Moore, 1999). As young lesbian, gay and bisexual people do not tend to have the same kind of social outlets as heterosexual adolescents, they often remain in relative isolation until they are old enough to enter the adult gay community and culture, which has tended to centre on pubs and clubs (Moore, 1999; Morrow, 1993;

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Mullen, 1998). As already alluded to, one of the reasons for the high use of alcohol among lesbian, gay and bisexual people has been identified as the lack of places for such young people to socialise safely, apart from pubs and clubs (Kreiss and Patterson, 1997; Mullen, 1998).

Youth groups specifically for young lesbian, gay and bisexual adolescents can serve a vital role in overcoming isolation (Peters, 1997). In a qualitative study, Nesmith et al (1999) found that the existence of a common meeting place was of fundamental importance to many of the lesbian, gay and bisexual young people that they interviewed. As well as being somewhere to meet other young lesbian, gay and bisexual people, and being an introduction to the gay, lesbian and bisexual community (Nesmith et al, 1999), youth groups can provide a 'safe space' for working out problems surrounding 'the stigma of growing up gay' (Peters, 1997, p. 51). The importance of being able to reciprocate support, that is, to support others who were supporting them, was evident in the study of Nesmith et al (1999), and sharing problems with a group of people in similar situations is one way to do this.

Morrow (1993) claims that, although they are few, various efforts have been made in the United States to establish opportunities for young lesbian, gay and bisexual people to socialise safely and in an appropriate environment. To illustrate this she describes a project called OUTRIGHT in North Carolina, which is described as a positive, chemical-free socialisation outlet for young lesbians and gay men providing social events and education on relevant issues. There is some evidence that similar efforts are being made in various parts of the United Kingdom, with the GLYSS youth groups being one example.

The importance of positive role models for young people in general (Kelly, 1996), and for young lesbian, gay and bisexual people in particular (Nesmith et al, 1999) has been identified. However, this support is denied for many young lesbians and gay men. Positive adult lesbian, gay and bisexual role models are few, often due to the fear of discrimination on the part of the adult (Morrow, 1993). Kelly (1996) argues that erroneous societal links between homosexuality and paedophilia, a link which has on occasion been postulated by influential groups such as the medical profession (Sheard,

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1998), have prevented many lesbian and gay adults, particularly those who work with young people, from supporting young lesbian and gay individuals. As well as positive role models being hidden, negative stereotypes are often presented (Kelly, 1996). In addition, most parents are heterosexual and so are unable to be a positive lesbian, gay or bisexual role model to their child (Morrow, 1993). Nesmith et al (1999) found that the young people that they interviewed sought support from a parental figure who replaced a parental advice-giving role, acted as a role model or offered nurturing.

Richardson (1998) argues that, if citizenship is defined as being a set of civil, political and social rights, gay and lesbian people in western society are denied many of the rights of citizenship that are taken for granted by heterosexual people. Set against this background, it is perhaps not surprising that services and support for lesbian, gay and bisexual young people are lacking, or that those who attempt to provide this service or support find the endeavour problematic. One such problem encountered by potential service providers for the young lesbian, gay and bisexual community is illustrated in the history of the Lesbian Information Service in Todmorden, West Yorkshire. The service was initially based in Leicester but when Section 28 was introduced Leicester City Council withdrew its financial support. Since then the project has struggled to continue on small grants despite receiving, for example, 1,992 requests for support or information in 1993 (Middleton, 1994).

This example illustrates how an 'infrastructure' of support for those attempting to provide services for lesbian, gay and bisexual young people could make a difference. The National Youth Agency, which was established in 1991 to act as a central focus for youth work in England, aims to support local authority youth services and local and national voluntary youth organisations (National Youth Agency, undated). In recognition of the problems faced by those attempting to provide services for young lesbian, gay and bisexual people it has set up a National Network for organisations working with this client group, which aims to create opportunities for discussion and support between these organisations.

It is evident from the preceding discussion that the needs of young lesbian, gay and bisexual people are likely to be complex, and that providing appropriate services for

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them is not necessarily easy. Collaboration between different professional groups and agencies, in both the planning and delivery of services, is a model of service provision which has attracted much credence in recent years (Bloxham, 1997). The GLYSS project is an example of this model, and so this chapter will conclude with a short discussion of inter-agency working.

## **2.4 Inter-agency working**

Inter-agency collaboration or working can be defined as

‘shared planning and/or delivery of work across different organisations, involving different professional traditions and skills’ (Bloxham, 1996, p.390).

The benefits of inter-agency collaboration and work can be numerous (Bloxham, 1996), and in recent years there has been an increasing belief in these benefits in the field of health and welfare (Bloxham, 1998). Youth and community agencies, with their experience of working alongside other agencies such as schools, have also been a part of the movement towards inter-agency collaboration (Bloxham, 1998). Benefits to be gained have included the rationalisation of resources, a reduction in the duplication of effort, and the possibility of providing a more effective and integrated service (Bloxham, 1998). In addition, Nezelek and Galano (1993) state that there is an increased potential for ‘coalitions’ to influence policy making in a positive way.

Many factors have been identified that are likely to enhance inter-agency working. Shared aims are an important feature of successful inter-agency work (Butterfoss et al, 1993; Nezelek and Galano, 1993), as are shared values (Bloxham, 1998). Effective personal and interprofessional relationships, including understanding and mutual respect between professional groups, are also stressed in many studies (Bloxham, 1996; Bloxham, 1998). Kane (1980, in Bloxham, 1996) states that the defence of professional autonomy is a major obstacle to effective inter-agency working, and Scriven (1995) claims that inter-agency work is enhanced by having an individual to facilitate the work. In addition, formalised co-ordinating strategies should be in place (Bloxham, 1998). Delaney (1994) states that, overall, a combination of rational planning combined with informal working relationships, shared goals and networking, is the most likely way to achieve successful inter-agency working.

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Bloxham (1996) investigated the specific issues for inter-agency collaboration generated by what she terms the 'controversial' field of young people's sexual health. It is likely that inter-agency work in this area will face additional pressures with greater need for shared values and mutual respect, and a key finding was that these shared aims and mutual respect could only be achieved by

'gently nurtured relationships growing from a clear incentive to collaboration' (Bloxham, 1996, p.400).

Another facet of collaborative work with young people could be viewed as involving them in decisions about the services that they use. Allard (1996, p. 165) states that the principle

'that children.....have a right to be consulted over decisions affecting them and to have their views taken into account by the adults working with or for them now has general currency'.

However, Allard (1996) also claims that ensuring that young people effectively participate in policy development is not easy, and that it can be difficult to ensure that they are being empowered and not exploited. She states that to ensure that young people are being empowered and not exploited requires:

- a genuine desire to listen to what young people have to say;
- a group of young people who want to be involved and are concerned about the issue;
- at least one worker with enough skill and courage to work with young people on what they want to do or say.

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## Chapter 3 About the GLYSS project

### 3.1 Development of the GLYSS project

The Gay and Lesbian Youth Support Services (GLYSS) in Warrington and Halton arose from a perception that existing initiatives were not reaching young lesbian, gay and bisexual people (Holliday, 1999). This perception developed from a number of sources. It was initially noted by a Health Promotion Specialist in HIV and Sexual Health that local services for lesbian, gay and bisexual people were not attracting younger people, those aged 25 years and under (Holliday, 1999). This observation was supported by the findings of a qualitative needs assessment project concerning the holistic and sexual health needs of gay and bisexual men in Cheshire and Liverpool, in which young men expressed their actual and potential loneliness and their social isolation (Murphy et al, 1995). It also emerged from this study that sexual health promotion alone had limited effect, and that a more 'holistic' approach, that is 'an approach that considers the whole person, rather than considering them in terms of disease, parts of the body or sexual practice' (Murphy et al, 1995, p.49), benefited many areas of gay men's lives, as well as their sexual health. Discussions with the Youth Service were initiated by the Health Promotion Specialist in HIV and Sexual Health to investigate further whether existing provision was suitable and safe for lesbian and gay young people, and following this it was concluded that there was a need for a specific service for this group.

GLYSS was conceived as a collaborative multi-agency project involving Youth, Health, Education and Social Services (Holliday, 1999). Senior managers from each of these services were invited to discuss potential support for the work. Finance for a proposed three-year development project, headed by a Development Worker for Lesbian and Gay Youth, was sought through the Joint Service Monitoring Group: Sexual Health, based at North Cheshire Health. Although initially unsuccessful, the application was approved in January 1997 and funding was awarded for a three-year period. There was much interest in the Development Worker post, with 96 requests for application forms and 55 completed applications being received. The job description and person specification for the Development Worker post were drawn up by representatives from Health Promotion, the Youth Service and Social Services, and can be seen in Appendix 1. The post holder took up her position in October 1997.

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In terms of project structure, the GLYSS project is managed by a multi-disciplinary Management Group. Representatives from the collaborating organisations within North Cheshire sit on this group. After the change from County Council to Unitary Authority status which occurred in North Cheshire the management of the project was split into two, with work in Warrington being overseen by the Warrington GLYSS Management Group and work in the Runcorn and Widnes areas being overseen by the Halton GLYSS Management Group. However, this proved difficult to operate and consequently the Management Groups were merged again.

As a three-year development project, it was envisaged that after this time period the work of the project would become self-sustaining and embedded into mainstream services. This had not been completely achieved at the end of three years, and finance for an extra year was provided by North Cheshire Health, Halton Borough Council and Warrington Borough Council.

### **3.2 Aims of the GLYSS project**

The aims of the GLYSS project, as outlined in the job description for the Development Worker, are:

1. To establish contact with young lesbian women and gay men with the aims of:
  - a) assessing holistic health needs and empowering them as a group to address their expressed needs;
  - b) to enhance mental health, and support young lesbian women and gay men to develop the necessary skills, knowledge and understanding to devise appropriate responses to issues related to their own sexuality and sexual health.
2. To work with the Youth Service and other organisations to discourage discrimination against young people on the grounds of their sexuality:
  - a) to work with agencies to assist and support them to advise and counsel young people on issues of sexuality;
  - b) to work with Youth Service staff and management to develop policies for work with young lesbian women and gay men.

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In addition, the GLYSS Management Group produced a 'Vision for 2000' in January 1998 ('Away Day' for Management Group Report, 1998). This stated that:

- all people working directly with young people should be comfortable with the issues;
- there should be comprehensive staff training;
- there should be policies and strategies in place to underpin training/awareness and inform practice;
- young people should be empowered to start change (self advocacy);
- practical programmes/support should be in place for lesbian and gay young people;
- services should become more visible;
- all relevant agencies should play a role/address the issues;
- there should be resources for work after project ends.

The issues on this list can be related to the two major aims above, and it is against these stated aims that the GLYSS project is evaluated.

### **3.3 Work of the GLYSS project**

For the purpose of this report, an outline of the work of the GLYSS project is presented here. It is not possible to describe in detail all of this work however, and more detail can be found in the GLYSS Annual Reports.

#### **3.3.1 Work with young people**

Since the beginning of the GLYSS project, the GLYSS Development Worker has provided information and support for young lesbian, gay and bisexual people, both in person and via the telephone. Therefore young people have been able to access the GLYSS project on an informal basis either by telephone or by visiting the Development Worker at her office. In addition, a One-to-One Support Service was set up for those young people who needed more comprehensive support. This was designed as a 'stop-gap' until the Youth Groups could be established and took both agency and self-referrals, operating as an appointment based support service (Broadhead, 1999). Clients received an assessment appointment and then a further five appointments before a final review meeting. The work of the One-to-One Support Service was gradually taken over by the Youth Groups, where individual young people were offered the opportunity to share an issue with a Youth Worker and receive any relevant information. In cases where this



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was not appropriate young people were referred to other services. In addition, the GLYSS project has a small resource base where books, reports, resource packs, games, leaflets, newsletters and magazines are available. Young people can arrange to borrow these.

During 1998 two Youth Groups were set up for lesbian, gay and bisexual people, one based in Halton and one in Warrington. These involve services working together to deliver group work on a weekly basis (Broadhead, 1999), for example the Youth Service providing Youth Workers to deliver face-to-face work, and accommodation being provided by Social Services or other local service providers. All of the Youth Workers involved with the Youth Groups receive line management and training from the Youth Service. A varied programme of activities are provided for the young people at the groups. Originally, the Lesbian, Gay and Bisexual Youth Working Group, consisting of 4 young people and 4 workers, oversaw the establishment and subsequently the running of the Youth Groups. Young people served a six-month term of office, and they were involved in all decision making about the groups. Both of the Youth Groups are now located within Youth Service provision and the Working Group no longer operates. The Youth Groups have received commitment for the future.

During 1999 the GLYSS project commissioned a qualitative study of the life experiences of young lesbian, gay and bisexual people attending the Youth Groups in Halton and Warrington in order to explore their holistic health needs (Perry, 1999). It was planned that this could be used to further inform the work of the project.

### **3.3.2 Work with outside agencies**

Since the beginning of the GLYSS project, the GLYSS Development Worker has been available to provide support and advice to workers from other agencies, and to parents of young people, on the telephone and in person. In addition, workers and parents could access the resource base. On occasion, more formal work has been undertaken with outside agencies. For example, a project was set up with the Halton and Warrington Libraries whereby the GLYSS Development Worker and a group of young people worked with the Area Librarian for Children and Young People to organise a lesbian and gay collection of books for the public libraries. Also, an Education Pilot Project has recently

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been initiated by the GLYSS Development Worker in conjunction with the Health Promotion Team and Healthy Schools Initiative, and work is being carried out in two schools, examining emotional health and well being with a particular emphasis on lesbian and gay issues.

The GLYSS project has worked jointly with North Cheshire Health Promotion Service, in particular with the Health Promotion Specialist for HIV and Sexual Health and the Health Promotion Specialist for Schools and Young People, to develop training courses. There have been training courses on exploring bullying in schools, challenging homophobia, sexual health, issues of sexuality, and prejudice and oppression. All of these courses relate to work with young people, and the training has been offered free of charge to voluntary or statutory workers.

At a strategic level, the GLYSS project has been involved in the development of work around sexual health for young people. It was part of the Sex Education Group, which met for Halton and Warrington, and has written a strategy in relation to the delivery of sex education across Youth Services and Education. In addition the GLYSS project is involved in the HIV Sexual and Reproductive Health Strategy Development Groups for Halton and Warrington. The GLYSS Management Group has listed the GLYSS project as one of the agencies for consultation within the policy departments of the organisations they represent, i.e. Youth, Health, Education and Social Services. This means that on issues relating to young people, sexuality and equal opportunities, the GLYSS Development Worker will be available to comment on draft copies of policy documents.

In November 1999 the GLYSS project organised a national conference entitled 'Lesbian, Gay and Bisexual Youth: Their Future: Our Responsibility'. The conference aimed to publicise the work of the project and the way in which it had been set up, and to present the findings of the research into the experiences of young lesbian, gay and bisexual people. A total of 88 delegates attended the conference, representing many different agencies, both locally and nationwide.

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## Chapter 4 Study design and methods

### 4.1 Introduction

Numerous approaches to evaluation are possible, and according to Beattie (1995, p.465) different approaches 'have been polarised into two warring camps', quantitative and qualitative strategies. However, for evaluation to be meaningful it requires expertise from a wide variety of fields (Jenkinson, 1997), and so it can be argued that such polarisation is not helpful. As Smith and Cantley (1985) state, all data is potentially biased and the research design should seek to minimise this. In this study a pluralistic approach to evaluation and both quantitative and qualitative methods are utilised in order to give a broad overview of the GLYSS project. As evaluation is not only about what changes occur, but also what led to those changes (Bowling, 1997), the study is concerned with process as well as outcome. This is a 'mixed portfolio approach' (Beattie, 1995), seeking to compile a range of different kinds of information which can be used in the evaluation of the project, and taking into account the argument that no one approach can be expected to meet all the different interests and requirements of different stakeholders and audiences (Beattie, 1991).

Pluralistic evaluation is an evaluative approach proposed by Smith and Cantley (1985). They argued that the conventional mode of evaluative research was essentially experimental, rationalist and objectivist and as such was fraught with difficulties. Pluralistic evaluation essentially involves identifying the major groups involved in a policy and comparing them with each other throughout the research both in ideological perspectives and in operational strategies. Central to this approach is the perspective that 'Success is a pluralistic notion. It is not a unitary measure.' (Smith and Cantley, 1985, p. 173). Thus consideration has to be given to how the different groups involved view success and the strategies they employ to achieve this. Consequently pluralistic evaluation embodies the principles of methodological triangulation with data being collected from different sources (Øvretveit, 1998).

A variety of methods were thus utilised in order to conduct an evaluation of the GLYSS project. These are outlined separately below.

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#### **4.2 Retrospective analysis of data**

The GLYSS Development Worker provided copies of the project annual reports, and other relevant documents, which detailed the progress of the project and the work that had been undertaken. These were used as background information, and to enable a picture of the 'factual' details of the development and work of the project to be built up.

In addition, the GLYSS Development Worker collected data recording the following:

- telephone calls and 'drop in' visits from young people;
- telephone calls and 'drop in' visits from professionals;
- telephone calls and 'drop in' visits from parents;
- one-to-one sessions with young people;
- attendance at youth groups;
- training sessions facilitated by GLYSS.

These data were used to build up a picture of the number of contacts that were made with the GLYSS project. A contact is defined as an individual making one or more requests or enquiries. Data collection forms can be seen in Appendix 2, and in Appendix 3 there are definitions of the categories used to describe the issues raised by young people. All of the data were entered into a data-base and analysed using the Statistical Package for Social Sciences (SPSS).

#### **4.3 Semi-structured interviews**

Qualitative research methods are very useful where the issues to be studied are complex and sensitive (Bowling, 1997), as qualitative research describes social phenomena in words rather than in numbers, studies individuals in their natural setting rather than an experimental one, and focuses on the meanings that the participants attach to their social world (Bowling, 1997; Pope and Mays, 1995). Semi-structured interviews have a 'loose' structure consisting of open-ended questions that define the area to be explored, but allow the interviewer or interviewee to diverge in order to follow up particular areas in more detail (Britten, 1995). Thus, although the interview topics and questions that led into exploring these areas may have been defined initially, the semi-structured format allows interviewees to express ideas that are important to

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them, and answers can be clarified and more complex issues probed than would be possible using a more structured approach (Bowling, 1997). In the present study use was made of semi-structured interview material that had already been collected in a previous study (Perry, 1999), and semi-structured interviews were also carried out with various 'stakeholders' in the GLYSS project.

#### **4.3.1 Re-analysis of existing interview material**

During May, June and July 1999 fifteen semi-structured interviews were carried out with young people attending the GLYSS youth groups. The aim of this work was to explore the life experiences of young lesbian, gay and bisexual people living in the Halton and Warrington areas in order to identify their health and social care needs (Perry, 1999). During the course of these interviews the young people spoke about their perceptions of the GLYSS project, and so the interview transcripts were re-analysed in order to ascertain these views.

#### **4.3.2 Interviews with GLYSS 'stakeholders'**

Between November 2000 and March 2001 fifteen semi-structured interviews were carried out with various 'stakeholders' in the GLYSS project. Interviewees were selected after examination of documentation about the GLYSS project and in conjunction with the GLYSS Development Worker. A purposive sampling method was used, a deliberately non-random method which aims to sample a group of people with a particular characteristic (Bowling, 1997), in this case some 'involvement' with the GLYSS project. A cross section of individuals were approached to represent all of the services involved in the GLYSS inter-agency collaboration, members of the GLYSS Management Group, representatives from agencies who have worked with the GLYSS project on particular ventures, and parents of young people who have used the GLYSS project services. More detail about the background of interviewees is given in Appendix 4. Also in Appendix 4 is a sample interview schedule, although this had to be altered slightly according to the background of the interviewee.

The majority of the interviewees were contacted directly by the researcher. Where there was any doubt about the appropriateness of a direct approach, for example in the case of the parents of young people who had used the GLYSS project services, contact

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was first made by the GLYSS Development Worker. The nature of the study was explained, and permission sought to conduct an interview. Interviews were taped, with the permission of the interviewee, and the audiotapes transcribed. A content analysis was carried out with data being coded by theme.

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## **Chapter 5 Findings**

### **5.1 Overview of findings**

This chapter is organised into three main sections. The first section focuses on the data that were routinely collected by the GLYSS Development Worker. It examines the number of contacts that were made with the GLYSS project by young people, professionals and parents, and the kind of enquiries and issues that were raised.

In the second section of the chapter, the re-analysis of the existing interview material collected from interviews with young lesbian, gay and bisexual people attending the GLYSS Youth Groups is presented. This seeks to elicit their perceptions of the service.

Finally, there is an analysis of the interviews with other stakeholders in the GLYSS project.

### **5.2 Retrospective analysis of data**

Data were collected separately for the following activities:

- telephone calls and 'drop in' visits from young people;
- telephone calls and 'drop in' visits from professionals;
- telephone calls and 'drop in' visits from parents;
- the One-to-One Support Service;
- the Youth Groups;
- training.

Due to the difficulty in accurately maintaining this kind of contact data, it is possible that not all contacts have been recorded. Therefore, the figures in this report may be an underestimate.

#### **5.2.1 Telephone calls and 'drop in' visits from young people**

Contact with the GLYSS Development Worker could be made by young people either by telephone or by 'dropping in' to see her. The first time a young person made contact in either of these ways, he or she was recorded as a 'new client' contact. Subsequently, young people were recorded as 'repeat' contacts. Data were available for the three

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years between 1<sup>st</sup> January 1998 and 31<sup>st</sup> December 2000<sup>1</sup>, and during this three-year period a total of 580 contacts were made by young people. Of these, 67 were new client contacts, 505 were repeat contacts, and this information was not recorded for 8 contacts:

- in 1998 there were 146 contacts, 22 were new client contacts;
- in 1999 there were 233 contacts, 20 were new client contacts;
- in 2000 there were 201 contacts, 25 were new client contacts.

Of the 67 new client contacts:

- 43 (64%) were male;
- 23 (34%) were female;
- the gender of 1 new client was not recorded;
- 43 (64%) made contact by telephone;
- 11 (16%) made contact by 'dropping in';
- 2 (3%) made contact by letter;
- 1 (2%) made contact by attending a Working Group meeting;
- the way in which 10 (15%) made contact was not recorded;
- 22 (33%) were from Halton, 38 (57%) were from Warrington, and 7 (10%) did not supply this information.

Of the 505 repeat contacts:

- 326 (65%) were male;
- 179 (35%) were female;
- 336 (67%) made contact by telephone;
- 113 (22%) made contact by 'dropping in';
- 10 (2%) made contact by attending a Youth Working Group meeting;
- 4 (1%) made contact by letter;
- the way in which 42 contacts (8%) were made was not recorded;
- 232 (46%) were from Halton, 249 (49%) were from Warrington, and 24 (5%) did not supply this information.

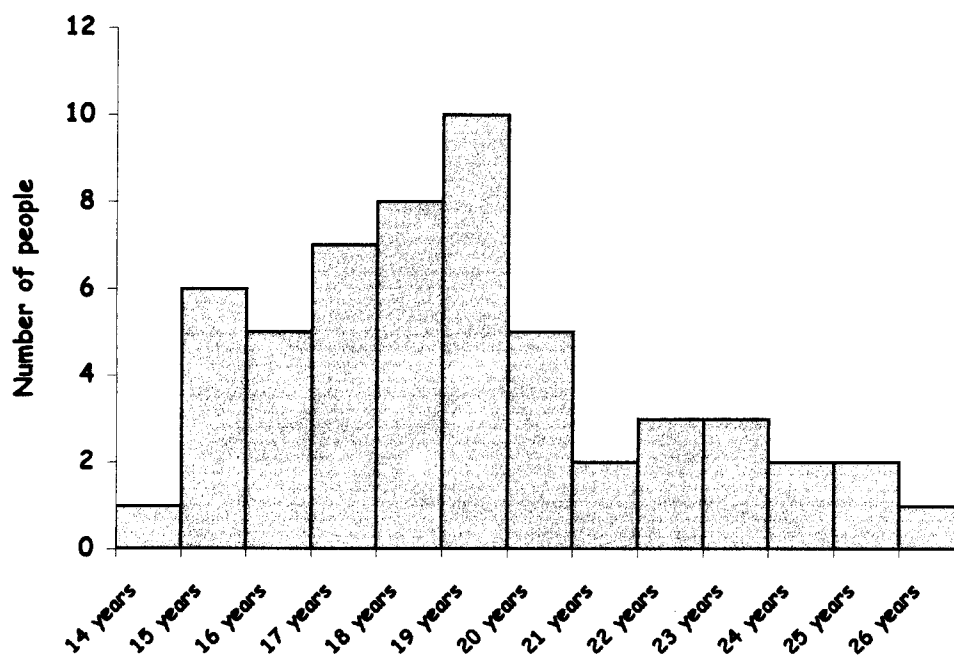
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<sup>1</sup> There were no data available for December 1998



The age distribution of the new clients is shown in the figure below. For eight of the new clients age was not recorded, and two new client contacts were aged 35 years. The figure displays the ages of the remaining 55 new clients.

**Figure 5.2.1a**      **Age distribution of new clients - telephone and drop in**



In the figures overleaf, the ages of the new clients and the repeat contacts are displayed as percentages of the total number of contacts in each group. It can be seen that the distributions are slightly different, and that young people aged 17 years and below are more likely to need on-going support than those older.

Figure 5.2.1b Age distribution of new clients as a percentage of all new clients

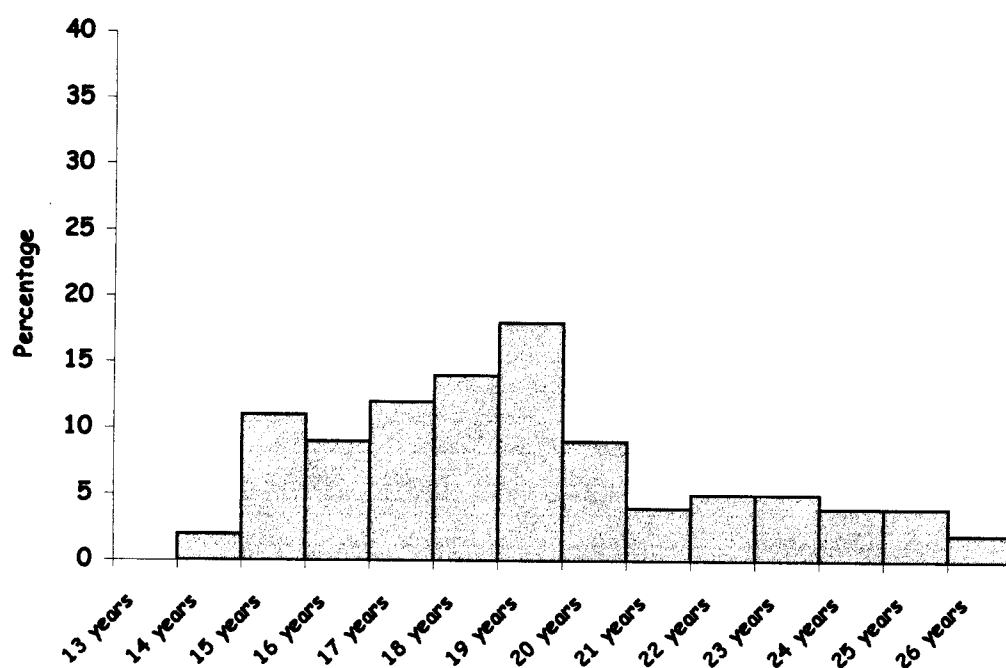
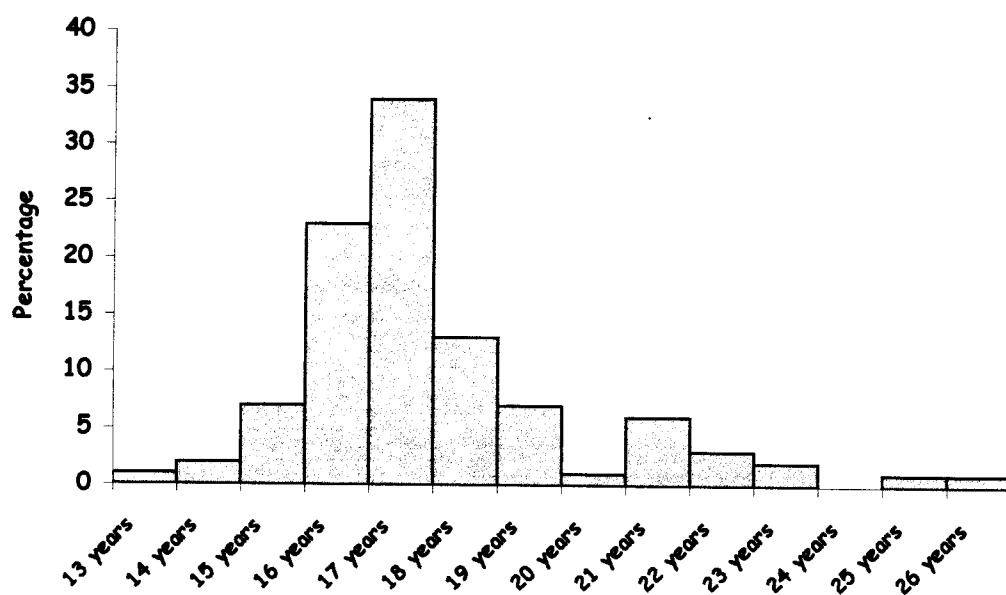


Figure 5.2.1c Age distribution of repeat contacts as a percentage of all repeat contacts



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Each contact with the GLYSS Development Worker could generate one or more enquiries. An enquiry is a specific request for information or advice. In total, 113 enquiries were made by the 67 new client contacts. Of these:

- 29 young people (43%) requested information about the Youth Groups;
- 19 young people (28%) requested general support;
- 19 young people (28%) requested information about the One-to-One Service;
- 12 young people (18%) requested general information or resources.

If the enquiries made by the new client contacts are displayed as a percentage of the total number of enquiries (113), the following pattern emerges:

- 26% of enquiries (29) were about the Youth Groups;
- 17% of enquiries (19) were for general support;
- 17% of enquiries (19) were about the One-to-One Support Service;
- 11% of enquiries (12) were about information and resources;
- 6% of enquiries (7) were about health (includes general health and mental health);
- 5% of enquiries (6) were about family and personal problems;
- the remaining 18% of enquiries covered a broad range of issues including the Youth Working Group, justice and equality, leisure, general GLYSS service information, bullying, drugs, coming out and education.

A total of 872 enquiries were generated by the 505 repeat contacts. Of these:

- 29% of enquiries (257) were for general support;
- 14% of enquiries (124) were about family and personal problems;
- 12% of enquiries (106) were about the One-to-One Support Service;
- 10% of enquiries (85) were about the youth groups;
- 6% of enquiries (52) were about health;
- 5% of enquiries (44) were about information and resources;
- 5% of enquiries (43) were about justice and equality;
- 4% of enquiries (31) were about mental health;
- 3% of enquiries (29) were about the Youth Working Group;
- 3% of enquiries (25) were about bullying;
- 2% of enquiries (20) were about sexual health;

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- the remaining 7% of enquiries covered a broad range of issues including leisure, drugs, coming out, cross dressing, bereavement, conferences and education.

It can be seen that there is a slightly different pattern of enquiries made by new client contacts and repeat contacts. For new client contact enquiries, the majority are about the Youth Groups, followed by requests for general support and for information about the One-to-One Support Service. With repeat contacts, there is a higher percentage of enquiries around family and personal matters in particular, and a higher percentage of enquiries over a broader range of issues in general.

### **5.2.2 Telephone calls and 'drop in' visits from professionals**

Contact with the GLYSS Development Worker could be made by professionals either by telephone or by 'dropping in' to see her. Data were available for the three years between 1<sup>st</sup> January 1998 and 31<sup>st</sup> December 2000<sup>2</sup>, and during this three-year period 363 contacts from professionals were recorded. It was not recorded whether these were new or repeat contacts. The number of contacts received increased from 99 in 1998, to 118 in 1999 and finally 146 in 2000. The majority of the contacts (318 or 88%) were made by telephone, with 29 contacts (8%) 'dropping in' and 10 contacts (3%) being made by letter. The mode of 6 contacts (2%) was not recorded. Of the 363 contacts:

- 142 (39%) were made by people in Halton;
- 124 (34%) were made by people in Warrington;
- 5 (1%) were made by people who work across Halton and Warrington;
- 88 (24%) were made by people from elsewhere in the United Kingdom;
- the geographical source of 4 (1%) were not recorded.

As with the young people, each contact with the GLYSS Development Worker by a professional could generate one or more enquiries. The 363 contacts generated 530 enquiries:

- 24% of enquiries (129) were for general service information;
- 16% of enquiries (86) were about resources;
- 16% of enquiries (83) were about joint working;
- 9% of enquiries (49) were about training;

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<sup>2</sup> There were no data available for December 1998

- 9% of enquiries (49) were for general support;
- 9% of enquiries (46) were referring clients;
- 4% of enquiries (20) were about the law;
- 4% of enquiries (19) were about publicity;
- the remaining 9% of enquiries (41) were about a broad range of issues including conferences, research and volunteering.

There were no differences in the type of enquiries made by professionals who were Halton based, Warrington based or based elsewhere in the country, except that the majority of the client referral enquiries came from Halton and Warrington. A total of 42% of the national enquiries were for general service information.

For a period of five months, from the beginning of August until the end of December 2000, the service for whom professionals worked was recorded. These results are displayed in the table below.

**Table 5.2.2 Services represented by professionals contacting the GLYSS project**

| SERVICE      | NUMBER (%) OF PROFESSIONALS |
|--------------|-----------------------------|
| Voluntary    | 20 (23)                     |
| Youth        | 18 (21)                     |
| Health       | 16 (19)                     |
| Schools      | 10 (12)                     |
| Social       | 7 (8)                       |
| Police       | 6 (7)                       |
| Education    | 4 (5)                       |
| Justice      | 2 (2)                       |
| Council      | 2 (2)                       |
| College      | 1 (1)                       |
| <b>TOTAL</b> | <b>86 (100)</b>             |

### 5.2.3 Telephone calls and 'drop in' visits from parents

Contact with the GLYSS Development Worker could be made by parents either by telephone or by 'dropping in' to see her. Data were available for the three years between 1<sup>st</sup> January 1998 and 31<sup>st</sup> December 2000<sup>3</sup>, and during this three-year period a

<sup>3</sup> There were no data available for December 1998

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total of 19 contacts from parents were recorded. It was not recorded whether these were new or repeat contacts. The majority of contacts were made by telephone, with one 'drop in' contact. Six of the contacts (31%) were parents in Halton, 12 of the contacts (63%) were parents in Warrington, and 1 contact (5%) was a parent from elsewhere in the country. Each contact from a parent could generate more than one enquiry, and in total the 19 contacts generated 35 enquiries:

- 37% of enquiries (13) were for general support;
- 34% of enquiries (12) were for service information;
- 17% of enquiries (6) were for client referral;
- 6% of enquiries (2) were about resources;
- 1% of enquiries (1) were about the law;
- 1% of enquiries (1) were about other issues.

#### **5.2.4 The One-to-One Support Service**

The One-to-One Support Service was in operation from the beginning of the GLYSS project, and was phased out, as originally planned, in March 2000. During this time, data were collected on the number of contacts young people made with this service. The first time a young person made contact with the One-to-One Support Service, he or she was recorded as a 'new client' contact. Subsequently, young people were recorded as 'repeat' contacts. Data were available for a two-year period from the beginning of April 1998 until the end of March 2000. During this period there were 103 contacts made with the One-to-One Support Service. Of these contacts:

- 27 were new client contacts;
- 76 were repeat contacts.

Of the 27 new client contacts:

- 13 (48%) were male;
- 13 (48%) were female;
- the gender of one individual was not recorded;
- 17 (63%) were from Halton;
- 10 (37%) were from Warrington.

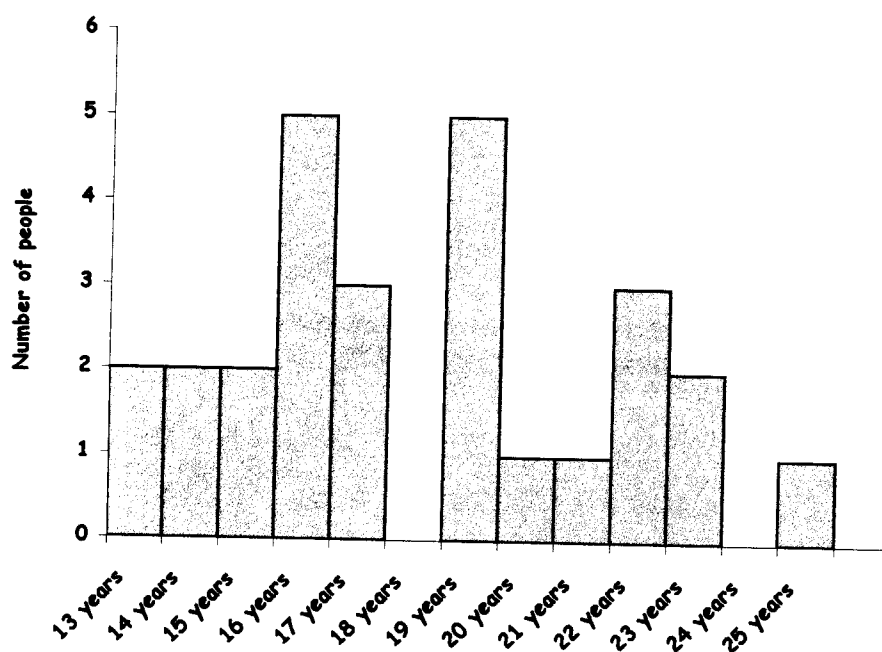
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Of the 76 repeat contacts:

- 42 (55%) were male;
- 34 (45%) were female;
- 44 (58%) were from Halton;
- 32 (42%) were from Warrington.

The age distribution of the new client contacts with the One-to-One Support Service is shown in the figure below.

**Figure 5.2.4a Age distribution of new clients - One-to-One Support Service**



In the figures overleaf, the ages of the new clients and the repeat contacts are displayed as percentages of the total number of contacts in each group. It can be seen that the distributions are slightly different, and that young people aged 18 years and below are more likely to need on-going support than those older.

Figure 5.2.4b Age distribution of new One-to-One Support Service clients as a percentage of all new One-to-One Support Service clients

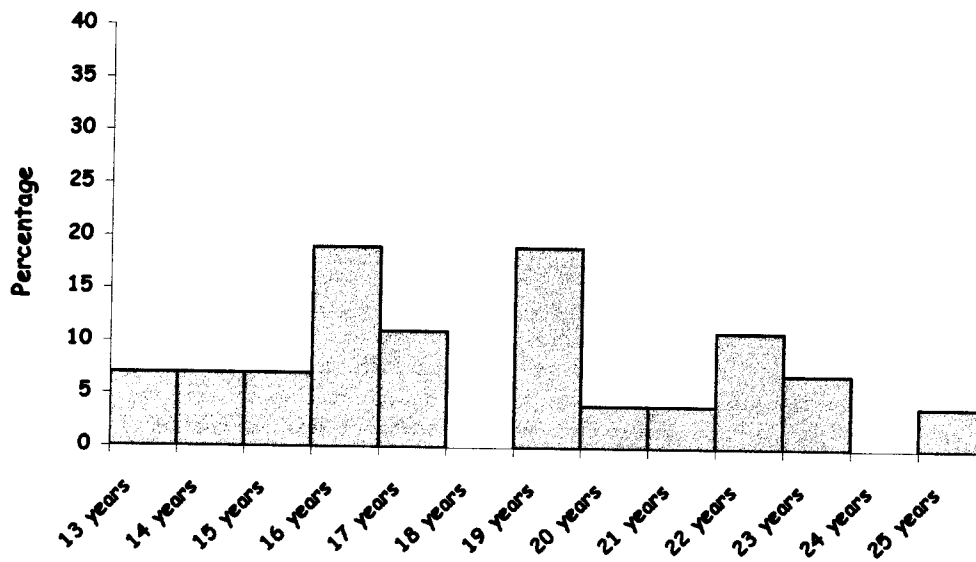
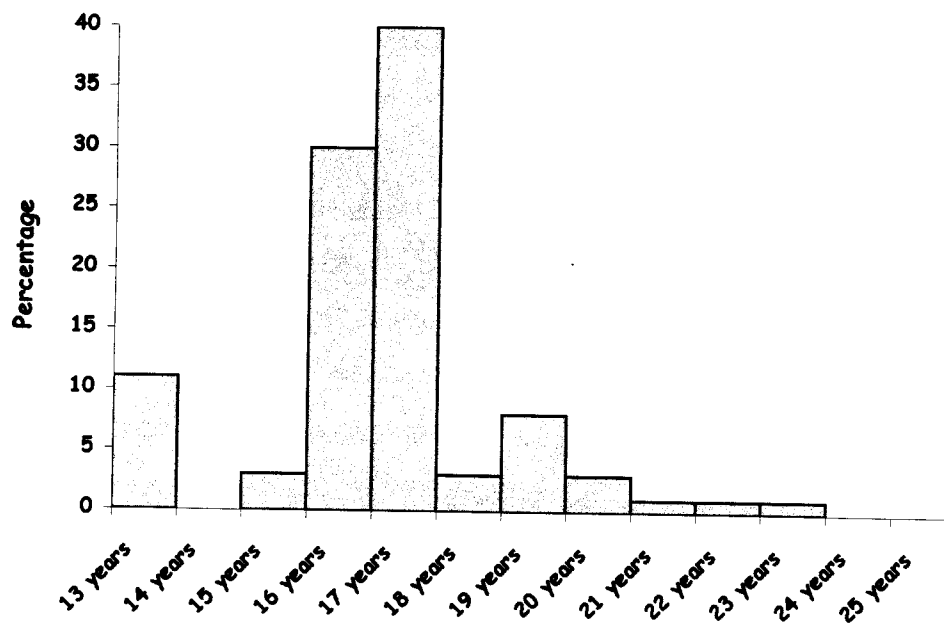


Figure 5.2.4c Age distribution of repeat One-to-One Support Service contacts as a percentage of all repeat One-to-One Support Service contacts





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Each contact with the One-to-One Support Service could generate enquiries and discussion about one or more issues. In total, 126 issues were raised by the 27 new client contacts. Of these young people:

- 19 (70%) raised the issue of family relationships;
- 17 (63%) raised the issue of personal relationships;
- 17 (63%) raised the issue of mental health;
- 16 (59%) raised the issue of coming out;
- 14 (52%) raised the issue of homophobia;
- 10 (37%) raised the issue of bullying;
- 6 (22%) raised the issue of sexual health;
- 5 (19%) raised the issue of school;
- 3 (11%) raised the issue of housing;
- 3 (11%) raised the issue of drugs.

In addition, issues around general health, confidence and self-esteem, bisexuality, transgender, abuse, violence, suicide, religion, identity and the youth groups were raised by one or two young people each.

If the issues raised by the new client contacts are displayed as a percentage of the total number of issues raised (126), the following pattern emerges:

- family relationships made up 15% of all issues raised;
- personal relationship made up 13% of all issues raised;
- mental health made up 13% of all issues raised;
- coming out made up 13% of all issues raised;
- homophobia made up 11% of all issues raised;
- bullying made up 8% of all issues raised;
- sexual health made up 5% of all issues raised;
- school made up 4% of all issues raised;
- housing made up 2% of all issues raised;
- drugs made up 2% of all issues raised.

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A total of 291 issues were raised by the 76 repeat contacts with the One-to-One Support Service. Of these:

- personal relationships made up 19% of all issues raised;
- family relationships made up 16% of all issues raised;
- coming out made up 12% of all issues raised;
- housing made up 9% of all issues raised;
- mental health made up 9% of all issues raised;
- sexual health made up 8% of all issues raised;
- homophobia made up 7% of all issues raised;
- bullying made up 5% of all issues raised;
- confidence and self-esteem made up 3% of all issues raised;
- the remaining 12% of issues raised concerned areas such as general health, bisexuality, transgender, drugs, abuse, violence, domestic violence, school, careers and the youth groups.

It can be seen that the same kind of issues are raised by the new client contacts with the One-to-One Support Service as by the repeat contacts.

#### **5.2.5 The Youth Groups**

Attendance data for the Warrington Youth Group were available for 1999 and 2000. The first time that a young person attended the Youth Group they were recorded as a new client. At subsequent visits they were recorded as a repeat contact. Over the two year period:

- 747 youth group contacts were made;
- 58 were new client contacts;
- 689 were repeat contacts.

During 1999:

- records were available for 30 youth group sessions;
- there were 263 youth group contacts;
- 37 were new client contacts, of whom 20 (54%) were male and 17 (46%) were female;
- 226 were repeat contacts;

- the average number of young people attending each session was 9.

During 2000:

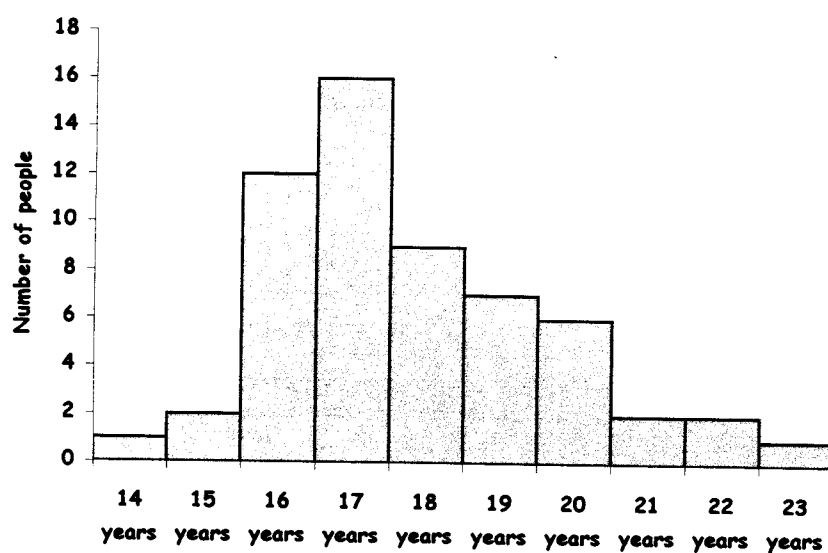
- records were available for 39 youth group sessions;
- there were 484 youth group contacts;
- 21 were new client contacts, of whom 14 (67%) were male and 7 (33%) were female;
- 463 were repeat contacts;
- the average number of young people attending each session was 12.

Of the 58 new client contacts:

- 34 (59%) were male;
- 24 (41%) were female
- 8 (14%) lived in Halton;
- 44 (76%) lived in Warrington;
- 6 (10%) lived elsewhere (included young people from Liverpool and Macclesfield).

The age range of the 58 new client contacts is shown in the figure below.

Figure 5.2.5a Age of Warrington Youth Group new client contacts



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Attendance data for the Halton Youth Group were available for six months during 1998 (August-December), for the whole of 1999, and for nine months during 2000 (January-September). The first time that a young person attended the Youth Group they were recorded as a new client. At subsequent visits they were recorded as a repeat contact.

Over the two year and three months period:

- 500 youth group contacts were made;
- 32 were new client contacts;
- 468 were repeat contacts.

During 1998:

- records were available for 17 youth group sessions;
- there were 66 youth group contacts;
- 9 were new client contacts, of whom 6 (67%) were male and 3 (33%) were female;
- 57 were repeat contacts;
- the average number of young people attending each session was 4.

During 1999:

- records were available for 34 youth group sessions;
- there were 229 youth group contacts;
- 17 were new client contacts, of whom 11 (65%) were male and 6 (35%) were female;
- 212 were repeat contacts;
- the average number of young people attending each session was 7.

During 2000:

- records were available for 25 youth group sessions;
- there were 205 youth group contacts;
- 6 were new client contacts, of whom 2 (33%) were male and 4 (67%) were female;
- 199 were repeat contacts;
- the average number of young people attending each session was 8.

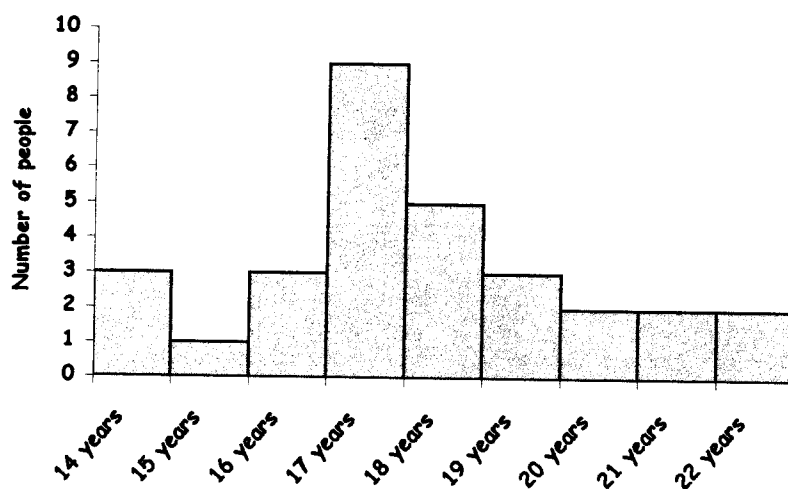
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Of the 32 new client contacts:

- 19 (59%) were male;
- 13 (41%) were female
- 23 (72%) lived in Halton;
- 8 (25%) lived in Warrington;
- 1 (3%) lived elsewhere.

The age range of 30 of the new client contacts is shown in the figure below. The age of the remaining two new client contacts was not recorded.

**Figure 5.2.5b Age of Halton Youth Group new client contacts**



### 5.2.6 Training

Training data were difficult to collate and the information available is incomplete. However, a series of one-day training courses have been run by the GLYSS project, some in conjunction with the Health Promotion Service for North Cheshire. The table below displays the training days for which records were available, in order to give an outline of the kind of work that has been undertaken in this area.

**Table 5.2.6 Training days**

| DATE                               | TITLE  | NUMBER OF PARTICIPANTS |
|------------------------------------|--|------------------------|
| April, 1998                        | Challenging Homophobia in Work With Young People                         | 12                     |
| August, 1998                       | Young People and Sexual Health Issues (Skills and Resources for Workers) | Unavailable            |
| November, 1998                     | Equal Opportunities  | Unavailable            |
| December, 1998                     | Sexuality and Young People   | 10                     |
| March, 1999                        | Sexualities  | 15                     |
| April, 1999                        | Stop Bullying Now!   | 21                     |
| September, 1999                    | Sexuality and Young People   | 9                      |
| October, 1999                      | HIV/Sexual Health  | 12                     |
| November, 1999                     | Young People and Sexual Health   | 12                     |
| February, 2000                     | Challenging Homophobia   | 12                     |
| October, 2000                      | Challenging Homophobia   | 8                      |
| October/November 200 (over 3 days) | Training for Trainers (Social Services)                                  | 8+                     |
| December, 2000                     | Sexuality and Young People   | 8                      |
| March 2001                         | Sexuality and Homophobia   | 8                      |

Representatives from Youth, Health, Education and Social Services have participated in the training days. 'In-service' evaluation of training has elicited a very positive response from participants in terms of course organisation and content, teaching methods and appropriateness, and their enjoyment, confidence and motivation.

In addition, the GLYSS Development Worker has contributed to conferences and workshops on sexual health, mental health, and sexuality for North Cheshire Health and South Cheshire Health Authorities.

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### 5.2.7 Conclusion - retrospective data analysis

As data were collected separately for each of the services, young people who accessed more than one service, for example made a telephone enquiry and attended a youth group, would have been recorded as a 'new client' to both of these services. It is not possible, therefore, to calculate a total number of young people who used the services of GLYSS. However, it has been possible to calculate the total number of 'new' users for each service, and to look at the patterns of enquiries made by both new and repeat contacts. To summarise:

- between January 1998 and December 2000, 67 new clients contacted the GLYSS Development Worker by telephone or 'drop in', and there were 505 repeat contacts;
- between April 1998 and March 2000, 27 new clients used the One-to-One Support Service, and there were 76 repeat contacts;
- between January 1999 and December 2000, 58 new clients attended the Warrington Youth Group, and there were 689 repeat contacts;
- between August 1998 and September 2000, 32 new clients attended the Halton Youth Group, and there were 468 repeat contacts.

A slightly higher percentage of males than females contacted the GLYSS project via the telephone contact service, and used the Warrington youth group. For the One-to-One Support Service, there was more of an equal gender balance. Although issues about general support and family and personal relationships were likely to be raised in both telephone enquiries and the One-to-One Support Service, issues such as coming out and homophobia were more likely to be addressed in the latter service.

For professionals and parents:

- between January 1998 and December 2000, 363 contacts were made by professionals;
- between January 1998 and December 2000, 19 contacts were made by parents.

Contacts from professionals increased gradually over the three years. The number of contacts from Halton and Warrington-based professionals was about equal and a wide

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variety of enquiries were made. Nearly one quarter of the contacts from professionals were received from people outside of the Halton and Warrington areas.

To conclude, it is evident that many contacts have been made with the GLYSS project, through the various services available, by both young people and professionals. A small number of contacts have also been made by parents.

### **5.3 Interviews with young people using the GLYSS Youth Groups**

Fifteen interviews were carried out with young people attending the GLYSS Youth Groups in Halton and Warrington, as described in more detail elsewhere (Perry, 1999). Of these, 8 were men and 7 were women, and their ages ranged between 14 and 21 with the majority (8) being aged 17 or 18 years. Twelve of the young people were either at school, college or university, one was in paid employment, one was engaged in voluntary work and one was unemployed. Seven of the men defined themselves as gay and one as bisexual. Four of the women defined themselves as lesbian, two as gay and one as bisexual.

All of the young people interviewed were complementary about the services offered by the GLYSS project, and three major themes emerged from the interview material. These were: combating feelings of isolation; a need for easily available and appropriate information about issues concerning lesbian, gay and bisexual people; and a need for awareness and acceptance. Each of these themes will be examined in turn, although it is evident that there is some relationship between them in terms of their impact on the young people's lives.

That the GLYSS project, particularly the Youth Groups, helped to combat feelings of isolation, is a perception that was expressed by all of the young people as illustrated in the following quotation:

*'.....which I think is another real big factor, loneliness. Because you feel really isolated, I know I did. And that is why this gay youth club is such a good thing because it gets rid of that feeling of isolation.' (Male, 18, Warrington).*

Feelings of isolation arose for the young people because they often did not know anybody else who was lesbian, gay or bisexual, and it was only at the Youth Groups that



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they met others who defined themselves in this way. For example, one young woman said:

*'But it is quite useful coming here, you feel you're not the only one in the world. It's good.'* (Female, 21, Warrington).

The importance of meeting other lesbian, gay and bisexual people and the impact that this has on feelings of isolation can be understood in different ways. Firstly, the issue of meeting people 'like me', illustrated in the comment below:

*'Because it shows you are not alone, in what you feel, and it's good to be with other people like you.'* (Female, 14, Halton).

The second important factor expressed by the young people was being able to talk to people facing 'similar situations' as illustrated in the following quotations. The second comment elaborates on the first in that it identifies a view about empathy from those facing similar situations:

*'.....I think it is more being with people like you who you can feel comfortable with and discuss things that gay people get up to and lesbians and things. So you know you feel comfortable talking about it.'* (Male, 18, Warrington).

*'You get the chance to sit here and talk with others who will actually know what you're on about. Like when you're talking to a straight person, you could talk to them until you're blue in the face and they're just thinking, "Well you're just a dirty cow."'* (Female, 21, Warrington).

Another facet to the theme of combating isolation was that of being able to talk to workers who were aware of and knowledgeable about the issues that young lesbian, gay and bisexual people may face in their lives, as illustrated in this comment:

*'It is quite good to find somebody who specialises in talking to gay, lesbian or bisexual people and somebody who is a youth worker and deals with a whole range of issues just focused on gay, lesbian and bisexual people.'* (Male, 16, Halton).

The second theme identified from the young people's interview material was that of a need for easily available and appropriate information about issues concerning lesbian, gay and bisexual people. Those interviewed perceived the Youth Groups to be a source of this information. One young man stated:

*'We get our condoms and everything from here and we don't have to go to the pregnancy clinic or anything.'* (Male, 16, Halton).

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This theme was also expressed in terms of issues around the advertising of the GLYSS project. The majority of the young people had found out about the GLYSS project through a friend, and a few commented on the difficulties they faced in acquiring this information and the need for any available services to be advertised in accessible places.

For example, one young woman said:

*'But you need to have it advertised widely around college and stuff for people to see it, because otherwise they are not going to know it's there are they?'* (Female, 20, Warrington).

Finally, the theme of awareness and acceptance was identified. This was expressed partly in terms of a tension between the GLYSS project as a 'specialist' service and a desire to access mainstream services. One young person commented that he felt that he should be able to access appropriate help and information without having to:

*'Knock on the gay door to talk to the gay person about gay stuff.'* (Male, 18, Warrington).

The theme of awareness and acceptance was also expressed in relation to 'visibility', as reflected in the following quotation:

*'And I don't think they should be localised in the one place either. Because it's like, we know you're gay and you have got to go to clubs but stay out of the way. Where we can't be seen.'* (Male, 16, Halton).

However, the perception that a specialist service was necessary, in terms of being in an 'accepting' environment with similar people, was articulated by all of the interviewees, and is summed up by a young man in the following quotation:

*'You get to socialise with other gay people. You get to talk about issues that affect everyone in the group not just you like as if you were in school or something. It is good. People understand what you are talking about as well. It is good, yes.'* (Male, 16, Halton).

The theme of awareness and acceptance was also illustrated in the surprise that some young people expressed that the GLYSS project should exist at all. One young man commented:

*'So I was really shocked when I found out there was one (youth group for lesbian, gay and bisexual people) in Warrington. I thought 'yeah'. ..... I couldn't believe it when I knew there was one in Warrington. Because I think it's a step forward.'* (Male, 18, Warrington).

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### **5.3.1 Conclusion - interviews with young people**

It is evident from this interview material that the young people value the GLYSS project as a means of combating isolation, and as a source of information. Although some did express reservations about using a 'specialist' service, the perception that they needed such a service in order to meet similar people, with whom they could empathise, in a safe environment, was apparent.

### **5.4 Interviews with stakeholders in the GLYSS project**

Fifteen semi-structured interviews were carried out with 'stakeholders' in the GLYSS project, representing the agencies that have collaborated in the work. Senior managers of agencies, members of the Management Group, workers on the GLYSS project, and a parent of a young person who accessed the project, were included in the sample. It was not possible to interview any representatives from the Education Service.

The analysis of this interview data is presented in a number of sections. Firstly, evidence relating to the extent to which the interviewees perceive that the GLYSS project has met its stated aims is presented. Secondly, there is an analysis of other themes that were identified from the interview material which give insight into the perceptions of stakeholders on the value of the GLYSS project. Finally, there is a section examining factors that were perceived to have enabled or hindered the development of the project.

The term 'professionals' is used to refer to all of the stakeholders who were interviewed. Quotations from the professionals are presented in order to illustrate themes that emerged from the interview material. The quotations are identified by the 'service' that the interviewee represented and a tape transcript number.

#### **5.4.1 The aims and objectives of the GLYSS project**

There was a general consensus among the interviewees that the GLYSS project had met the majority of its original aims and objectives and thus had been a success, as illustrated in the following quotation:

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*'I think the degree of success that has been had, or the level of success, has surprised me. I thought they would struggle to find quite so many customers. I thought they might struggle for the kind of acceptance and goodwill that they have received from all of the agencies. And I thought they would stumble at far more hurdles than they have done. I have been surprised at how well received the service is.'* (Social, 7).

In terms of the two stated major aims, the direct work that has been undertaken with young people was seen as valuable, and the perception was that the aims based around working with young people had been achieved. Some interviewees spoke in terms of the number of young people who had been contacted:

*'I think they've been quite successful, I know the numbers have been there, I'm not too sure whether other workers were quite astounded actually, the kind of numbers that they're getting.'* (Youth, 6).

Many interviewees had direct contact with young people who had used the GLYSS project services, and comments were made about what they perceived young people had gained from the GLYSS project. The theme of combating isolation was evident in this interview material, as it was in the interviews with the young people. For example, one interviewee commented:

*'I know meeting the young people and they've benefited enormously I think..... It's like they're sort of out of the wilderness and they've actually got somewhere they can connect to which is wonderful for their personal development.'* (Health, 1).

In addition, as in the interviews with young people, the tension between mainstream and specialist services was expressed. In particular, the problematic nature of the idea of combating isolation by taking an isolated group and re-isolating them was articulated by this group of interviewees, as illustrated in this quotation:

*'But there again they are alienating themselves because it is a group for gay people, you know, why can't this be a group within a school or a group within a youth club for everybody.'* (Parent, 11).

However, the view that such specialist services are necessary was also articulated. This was most often expressed in terms of the idea that the nature of society is such that young lesbian, gay and bisexual people need a safe space in which to meet others in similar situations. This was explained by one interviewee in the following way:

*'There's the need for generic services to involve and include all young people, including lesbian and gay young people, and I also believe that, you know short of changing the nature of society, there is still a need for specialist safe groups for those people to be in.'* (Health, 14).

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The theme of empowerment was also evident in the interview material, and the interviewees perceived that the young people who had used the GLYSS project had been empowered in a number of different ways. They had been able to meet other people, to identify and examine specific issues to do with their sexuality, and explore ways to handle these issues and take control of their lives. The essence of this is illustrated in the quotation below:

*'Some of them yes, it has empowered them to make contacts and they have moved on which is a positive thing really. But the group that we've got now, some of them have been here sort of, quite long served and you can see the change in them, you know they are more aware of the issues affecting them. They are more prepared to do something about it.'* (Youth, 10).

Finally, one interviewee articulated the idea that the *'stuff that the young people are prepared to share'* is an indication of the quality of the work that is being done with them.

The second major aim, around working with the Youth Service and other organisations, was also considered by the interviewees to have been quite successfully met. In particular, training courses that had been developed and run through the GLYSS project were thought to have been of great benefit. However, there was more doubt about the extent to which the GLYSS project had been able to influence the development of policies. There was a perception that, although the different agencies involved in the project had begun to learn about issues concerning young lesbian, gay and bisexual people, more work needed to be done if these issues were to be successfully incorporated into policy. This idea is illustrated in the following quotation:

*'I think internally in all those agencies we've still got more to learn in terms of our policies and procedures and practices and priorities, I wouldn't minimise that at all.'* (Youth, 13).

The perception was that the 'cultural' changes necessary to make a real difference to the way in which policies and procedures were formulated had not occurred, as explained below:

*'So in terms of the work that has been done with young people and the training and all that, that has been brilliant, but the cultural changes, perhaps have been..... That's right. The bit that makes that all live hasn't taken and I am not sure why.'* (Health, 2).

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The view was also expressed that such 'cultural' changes took a long time, and that in terms of the length of time for which the GLYSS project had been operating, progress had been made. One interviewee expressed this in the following way:

*'And I think it would have been a bit rich really in three years, if we had changed the whole culture of the way in the Youth Services and Social Services around issues of sexuality, get real, but there is definitely inroads into that'. (Health, 3).*

At the inception of the GLYSS project it was envisaged that the services developed would be taken into mainstream services, and that there would be sustainable changes in the practice and policies of the collaborating agencies. The lack of 'cultural' change was seen to be having a direct effect on the young people using the project in terms of their use of other agencies. As these other agencies had not always been able to integrate lesbian, gay and bisexual issues into their policies and practices, young people were nervous about accessing them because they were not confident that they would get an appropriate and supportive response. This is illustrated by the following quotation:

*'What has actually happened in reality was that a lot of the young people who could have benefited particularly from some mental health referrals, it just wasn't happening. They weren't confident with working with other organisations. About going to them, about talking to them, about those organisations being accepting and understanding of their sexuality.' (Health, 3).*

In addition, it was considered by some interviewees, that although changes instituted through the work of the GLYSS project appeared to be sustainable, they would not be sustained if the project, and particularly the Development Worker, were no longer present.

The GLYSS project was established to address issues concerning young lesbian, gay and bisexual people. However, many of the interviewees expressed the opinion that through the work that the project carried out with other agencies, it was contributing to a wider sphere. For example, two people commented that training sessions organised by the GLYSS project had helped them in their work not only when dealing with young people and sexuality, but in dealing with all people and many other sensitive issues also. In addition, the theme of synergy emerged from the interview material. This was expressed by one interviewee in terms of the way in which the work of the GLYSS project was able to help other agencies with particular targets that they were required

to reach, or help them towards goals on other projects, as illustrated in the quotation below:

*'We got things like 'Quality Protects' out, which is Social Services criteria, we got things like 'HImp' targets, we got things like 'Best Value', all kinds of stuff where there's criteria to be met that comes out of Government, that's national and local, and we say to these service providers we will help you to meet X,Y and Z....' (Health, 3).*

In addition, some interviewees identified a more general benefit of being associated with the GLYSS project. It was perceived by some as being good for the image of an agency to be involved. One interviewee expressed this in the following way:

*'I think there's a kind of spin off from all that which I think has been beneficial to us in that we've been seen to be interested in public health issues and issues that aren't solely our concern, which has done the department quite a lot of good, well I hope so anyway.' (Social, 7).*

#### 5.4.2 Avoidance of adverse publicity

One major theme to emerge from the interview material, which was commented upon by all of the interviewees, was that despite being a project of a controversial nature, the GLYSS project had never become the target of adverse publicity. The controversial nature of the project, and the fear that this engendered, was recognised from the start, and is illustrated by the following comment:

*'..... people actually did speak about real fears, about local councils and the general public getting hold of what we were doing, and then being fearful about how their service would be viewed being actively involved in this, and where they stood with promotion and Section 28 and all these sorts of things.' (Health, 3).*

It was also recognised from an early stage that there could be adverse publicity, and interviewees expressed the view that this possibility was always there. This is illustrated in the following quotation:

*'There could be a piece of adverse publicity and it just blows up and I think very early on we recognised that that could happen. And I don't think that there is any point when it is safe, I think there is always a risk of that happening.' (Health, 1).*

Surprise that there had been no adverse publicity was expressed by the majority of the interviewees, and a number of reasons were put forward to explain why this should be the case. One theme mentioned by a number of interviewees was that the project had been 'carefully packaged' in order to make it more 'acceptable'. This was particularly

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evident in relation to where the project was 'housed'. So, although the GLYSS project was specifically developed to work with young lesbian, gay and bisexual young people, it was perceived as being advantageous if it could be linked up with other work. As one interviewee explained:

*'...which was about putting it under mental health/sexual health umbrellas rather than a lesbian and gay issue.' (Social, 7).*

The GLYSS project was also perceived as being 'carefully packaged' in terms of the effort that had been spent investigating the legal angles, specifically in relation to Section 28 of the 1988 Local Government Act. Cheshire County Council Legal Services produced a report detailing aspects of the law and suggesting what may or may not be prohibited under Section 28. One interviewee stated:

*'They did a lot of legal investigation for us about the legalities, about possible issues people would pick up as resistance towards us. They were very good. They did lots of unpicking, block by block, saying you can't say that about the project.' (Health, 1).*

Another theme to emerge was that of luck. The majority of the interviewees felt that there had been an element of luck in the project not receiving adverse publicity. In addition, there was also a perception that the inter-agency nature of the GLYSS project had contributed. The membership of the Management Group ensured that a variety of local agencies were aware of, and had agreed to, the work being carried out by the GLYSS project. Therefore potential problems or areas of controversy could be dealt with at the planning stages. Both of these themes are illustrated in the following quotation:

*'So a bit of good fortune I suppose if I'm brutally honest, but I think in the main that's been because there's been quite a step-by-step informed approach to it.' (Youth, 13).*

Finally, one interviewee articulated the idea that because they had not 'shouted about' the project and the work they were undertaking too much, publicity, adverse or otherwise, had not been attracted. This infers that a degree of 'stealth' had to be employed in order to avoid adverse publicity, and is a theme that underpins all of the factors presented above. As one interviewee commented:

*'... I think if you make radical noises in a place like North Cheshire you stand a chance of being shut up quite comprehensively.' (Health, 2).*



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#### 5.4.3 Success as an innovative and well-structured project

A second major theme to emerge from the interview material was that of the GLYSS project being perceived as innovative and well structured. Initially, when setting up the project, an approach was made to the National Youth Agency in order to enquire about other similar projects. The professional involved was surprised to hear that they did not know of anything similar, and that they considered the project an innovative idea. This was a perception held by many interviewees and is illustrated by the following quotation:

*'To see an LGB job, full time, operating on a strategic and an operational level was just like wow, somebody has thought about this. It is not a piffling stab attempt at it with no money, no backing, which is usually what happens with this kind of work a lot of the time.'* (Health, 3).

This interviewee articulated the idea that the innovativeness of the GLYSS project lay in the client group it served rather than the type of work undertaken. This is explained further in the quotation below:

*'We're not going to Mars and taking chunks out of it and sending them to Saturn, it's not that complicated, it's youth work, it's training, it's strategy, it's the same stuff everybody else does around other issues and it's not that big a deal really.'* (Health, 3).

That the GLYSS project was well-structured and a model of good practice was expressed almost universally by the interviewees. It was perceived as being a good example for work with any group. One interviewee explained this in the following way:

*'I don't think anybody could dispute the way the project was actually set up. The whole aims and objectives, the steering group, the development plan, everything. And the outcomes we were expecting, the targets we were working to, is an excellent example of good project planning.'* (Health, 1).

#### 5.4.4 Factors that enabled or hindered the development of the GLYSS project

There were a number of factors identified by the interviewees that either helped or hindered the GLYSS project. A theme which emerged from the interview material was the importance of individuals, and the impact that they have had on the GLYSS project. Powerful individuals, sympathetic to the aims of the project, were frequently cited as being instrumental in moving the project on, and there was also the perception that, on occasion, powerful individuals had been able to stop particular developments from occurring also, for example by not attending meetings. One way in which this was

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expressed was in the many comments indicating that getting the right people 'on board' was crucial to the project. One interviewee stressed the importance of:

*'..... making sure that we take, how can I put this, the powers that be with us.' (Youth, 13).*

A second way in which the importance of individuals was expressed was in relation to the skills of the Development Worker. There was a consensus among the interviewees that certain skills and attitudes were necessary for the successful development of the project, and that had the Development Worker not possessed or developed these then the project would have run less smoothly. The Development Worker was perceived as being good at talking to professionals from any background and able to present her point of view clearly, to be calm and logical, to be persistent, and to be very enthusiastic about her work. The importance that was attached to the appropriate skills, knowledge and attitudes of the Development Worker is illustrated by the following comment about the applicants for the post:

*'That's one of the real strengths of the project, we had some serious quality people wanting to get in.' (Health, 2).*

Another theme to emerge from the interview material was that of the importance of communication. Adequate communication systems were perceived to be particularly crucial to this inter-agency, cross-district project, and this was illustrated at a variety of levels. Some perceived there to be a lack of communication about the project as a whole. This was seen by a number of interviewees as being a problem of communication from the 'top down', and it was suggested that although agencies may have been signed up to the GLYSS project at the highest level, this was not necessarily transferred down, and so workers did not always know what their service was 'signed up' to. Conversely, other interviewees perceived that there had been problems of communication from the 'bottom up', with, for example, individual workers initially agreeing to things regarding the project, but then encountering problems when taking these decisions back to their own agencies. This was variously explained as happening either because the nature of the GLYSS work made it difficult for the worker to report it back to his or her own agency, or because other, often more senior workers were not so happy about decisions made.

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Issues about communication on a more day-to-day basis, particularly between members of the Management Group, were also raised. Due to the inter-agency nature of the project it was often difficult to find times and places at which everyone could meet, and so other methods of communication had to be used. The Development Worker stated that trying to keep everybody informed created a lot of work for her. She found that working cross-district and from two offices was impractical from a communications point of view, as she perceived that people felt they could never contact her. The importance of confirming any agreements made between different people and agencies in writing was also emphasised by the interviewees. A number of examples were cited where it was believed that particular decisions had been taken, but related action did not occur and the decision was lost as it had never been formalised in a written agreement.

The importance of communication in enabling the project to continue was also articulated in terms of keeping other agencies not directly involved informed about the work of GLYSS in an effort to keep the needs of lesbian, gay and bisexual young people visible everywhere. There was a perception that in order to keep these issues on the agenda it was necessary to remind agencies constantly about them, but also that care had to be taken not to become a nuisance. One interviewee described this strategy in the following way:

*'Don't bombard them because they just get tired of you, but once every month they get an update or once every two months they get an update and then every year there is the report and then in between there are odd bits.....Just to say we appreciate your support and if you have ever got any suggestions about our work or any comments you would like to make....' (Health, 3).*

The GLYSS project, as a multi-agency initiative, faced issues that are well-documented as being problematic in this style of working. One such theme is that of the 'ownership' of the project, and a number of issues raised by the interviewees can be understood in terms of this theme. Lines of responsibility were not always clear, for example in the early months of the project there were difficulties over where the Development Worker should be housed, despite this decision having apparently been made. One interviewee described the kind of reactions that were received from various agencies in the following way:

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*'Things weren't terribly clear and lines weren't clear cut and they sort of said 'that's not our responsibility' and 'they don't belong to us.' (Health, 1).*

Some interviewees saw issues of ownership leading to individuals or agencies paying 'lip service' to the GLYSS project, and not being as fully committed to it as they appeared.

One interviewee expressed the problem in the following way:

*'As I mentioned before, that lip service thing, that you need to make sure that people are fully aware of the implications of what they're committing to and that they stand up to it....' (Health, 3).*

Some interviewees felt that this was the cause of some individuals on the GLYSS Management Group not being very active. However, another explanation was put forward by other interviewees, who spoke in terms of problems with inter-agency working. For example one person commented:

*'People were committed to the work and committed to inter-agency and with the best will in the world, you know, wanted to be united and take that forward. But living in the real world, you know you're sort of committed to that and then you drive back to the office and twenty things are waiting for you in terms of your own service.' (Youth, 9).*

Conflicting agendas are often identified as a problem in inter-agency projects, and this was a theme addressed by almost all of the interviewees. During meetings held at the outset of the project, it became clear to some workers that there were some very different agendas held by people who were involved. This was perceived as being partly because different agencies did not necessarily understand the systems, structures, cultures and constraints of others, so leading to unrealistic expectations. In addition the personal opinions of the individuals involved, particularly because of the controversial nature of the work with young lesbian, gay and bisexual people, were important. One interviewee commented on this situation towards the beginning of the life of the GLYSS project:

*'What was so obvious at the end of it was that they were all coming from totally different places and they were not in agreement about what this project was going to need.' (Health, 3).*

Another theme that emerged from the interview material when considering what had enabled, or not, the work of the GLYSS project, was fear. There was a perception that fear had prevented some people from contributing fully to the project. One interviewee

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commented on how useful a training day for the GLYSS Management Group had been in this respect:

*'Unfortunately we couldn't have one of those every two to three months to keep the people that were frightened, to keep the level of fear down, because it just kept, for certain people on that Management Group, I think the fear just took over on a regular basis and blocked them fully contributing, fully participating and fully backing the work and feeling confident about it.'* (Health, 3).

Despite the problems engendered by inter-agency working, there was a perception that when working with a group such as young lesbian, gay and bisexual people this was the best model of service provision to have. Working with the young people as part of the team was also perceived as a positive thing and was commented upon by many interviewees. One interviewee expressed this in the following way:

*'It's about, there's a dynamic. We work with young people we don't do things at them or to them we work with them.'* (Youth, 13).

All of the interviewees spoke of the future and what may enable or prevent the work of the GLYSS project from continuing. The major theme to emerge was that of competing priorities. Some of these priorities were local, but national priorities were also perceived as impacting on the GLYSS project. For example, one interviewee commented:

*'One of the difficulties we've got at the moment is that teenage pregnancy is so big that we are perhaps finding it more difficult to get into the sexual health arena....'* (Health, 3).

It was also perceived that if, in the future, the post of Development Worker was to disappear, then competing priorities would certainly take over:

*'Because what I think will happen is without the worker, with all the best intention in the world, it will slip off the agenda.'* (Youth, 8).

#### **5.4.5 Conclusion - interviews with stakeholders**

It is evident from this interview material that the professionals interviewed perceived the GLYSS project to be a success in many important ways. In terms of the aims and objectives of the project, interviewees identified the work carried out with young people as a particularly noteworthy achievement. Work with other organisations was also considered to have been a success, although it was felt that there was still more to do in order to influence the development of policies. The avoidance of adverse publicity, and the GLYSS project as an innovative and well-structured project, were themes which

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emerged from the interview material, and which help to illuminate ways in which the project was perceived as successful. A number of factors that had enabled or hindered the work were identified, with the major themes emerging being the importance of individuals, communication issues, the ownership of the project, conflicting agendas and fear.

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## **Chapter 6 Discussion**

### **6.1 Introduction**

In this chapter the work of the GLYSS project will be explored and discussed in relation to the data presented, and to the literature, in order to evaluate the project. The two major aims will be considered, and the future for the work of the project will be discussed.

### **6.2 Work with young people**

The first aim of the GLYSS project was centred on establishing contact with young lesbian, gay and bisexual people. As previously stated, the size of the young lesbian, gay and bisexual population is unknown, although the lowest estimates indicate that they must constitute a significant minority of the population (Burton, 1995), and, in addition, this population is largely 'hidden' (Platzer and James, 1997). Thus, contacting this group of young people could be challenging. However, it is evident from the data presented that the GLYSS project telephone service, the One-to-One Support Service and the Youth Groups were all accessed by the young lesbian, gay and bisexual population in Halton and Warrington. It is also evident from the interviews with professionals that they perceived the project to have been very successful in contacting young people. Thus it is clear that the GLYSS project did establish contact with young lesbian, gay and bisexual people, contact being sustained in a sizeable proportion of cases, and so succeeded in this aim.

Demographic information about the young people using the GLYSS project can be used to assess the extent to which all sections of the target population were represented, and to plan future service provision. In terms of gender, in total more men than women accessed the services provided by the GLYSS project. For the telephone service and the Youth Groups, there was a higher percentage of male than female new client contacts, but for the One-to-One Support Service the percentages were equal. It is possible, therefore, that young women are more likely to access a service such as the One-to-One Support Service than, for example, to attend facilities such as the Youth Groups.

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The ages of young people using the telephone service, the One-to-One Support Service and the Youth Groups were recorded, and it can be seen that contact was made with people aged from 13 years to 35 years. For the new client contacts to the telephone service and the One-to-One Support Service the majority were aged 19 years and below. When looking at the age distribution of the new and repeat contacts as a percentage of total contacts it can be seen that for both of these services it is the younger people, those aged 17 years and below, who utilise continuing support. The Youth Groups attracted new clients aged between 14 and 23, with 53% aged 17 years and below.

The GLYSS project was also concerned with assessing and addressing the holistic health needs of the young people that made contact. In this context, as previously alluded to, 'holistic health' is interpreted as 'an approach that considers the whole person, rather than considering them in terms of disease, parts of the body or sexual practice' (Murphy et al, 1995, p.49). The needs that the GLYSS project was aiming to respond to were 'expressed needs', that is, issues and wishes that were perceived as needs by the young people. It is evident from the range of issues around which young people requested help and advice, in both the telephone and the One-to-One Support Service, that multiple and complex needs were expressed. That the Development Worker provided ongoing support to young people indicates that these needs were being addressed. In addition, during 1999 the GLYSS project commissioned a qualitative study of the life experiences of young lesbian, gay and bisexual people attending the Youth Groups in Halton and Warrington in order to explore holistic health needs further (Perry, 1999). This piece of work has been used as a basis for demonstrating the expressed needs of the young people and to develop the scope of the project, for example in the recent work carried out with schools.

By addressing the expressed needs of young lesbian, gay and bisexual people the GLYSS project aimed to empower this group. If the framework devised by Allard (1996) regarding the empowerment of young people is considered, there is evidence in the data presented to suggest that young people were empowered through the GLYSS project. It is clear from the professionals' interview data that there was a commitment to working with the young people, and this is illustrated in structures such as the Youth Working Group, which included representatives of the young people, and the inclusion of



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the young people's artwork presentation in the Conference that GLYSS organized in 1999. These examples also illustrate that some young people wanted to be involved, and that there were workers with the necessary skills to work with them.

As part of its work with young lesbian, gay and bisexual people the GLYSS project aimed to enhance the mental health of this group. The data presented indicates ways in which this has occurred. It was evident from the young people's interviews that they had experienced feelings of isolation, as have been documented in the literature (Borhek, 1988, in Rivers, 1995a; D'Augelli et al, 1998; Grossman and Kerner, 1998; Morrow, 1993; Peters, 1997). It was also apparent that those interviewed perceived the GLYSS Youth Groups as being an important way to help to address that isolation, and this conclusion is supported by the number of young people from Halton who attended the Warrington Youth Group and the number of young people from Warrington who attended Halton, as well as the persistent small number of people attending both Youth Groups from outside the area altogether. This finding reflects the work of Peters (1997) and Nesmith et al (1999). Peters' (1997) claim that youth groups specifically for young lesbian, gay and bisexual young people provide somewhere that they can safely discuss issues that concern them was supported by comments from the young people, and by the use made of the opportunity that the GLYSS Youth Groups provided for young people to discuss their worries with a Youth Worker (personal communication, 2001). Comments made by the professionals also indicated that they perceived the Youth Groups to provide an important service in addressing issues of the isolation experienced by many young lesbian, gay and bisexual people.

One of the aims of youth work is to stop young people from being excluded from mainstream society (France and Wiles, 1997). The GLYSS Youth Groups, however, are a specialist service for young lesbian, gay and bisexual people, a deliberate attempt to address this client group's needs outside of mainstream service provision. This was an issue addressed by both the young people and the professionals who were interviewed, and the tension between mainstream and specialist service provision was acknowledged by both groups. The positive side of the GLYSS Youth Groups as specialist provision was illustrated in the interviews with the young people, in relation to addressing isolation as discussed above. In particular, they attached importance to meeting people who were

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like them, and who were facing similar situations, and this may reflect the importance that young people in general attach to peer group acceptance (van Beest and Baerveldt, 1999). Within the specialist provision of the GLYSS Youth Groups the young people are likely to have found this acceptance, another illustration of the way in which the GLYSS project enhanced the mental health of the young people contacted. However, specialist service provision can also be problematic, both in terms of 're-isolating' particular groups, as recognised in the interview material, and in terms of issues such as 'ownership' and funding, which can also be illustrated in the history of the GLYSS project.

### **6.3 Work with the Youth Service and other organisations**

The second aim of the GLYSS project concerned working with the Youth Service and other organisations, to assist and support them advise and counsel young people on issues of sexuality. There are indications in the data presented that this aim has been met. A number of training courses that were facilitated by the GLYSS Development Worker have been documented, and these courses were attended by individuals from a variety of agencies. The GLYSS Development Worker attempted to keep other agencies informed about the work of the project and the support that could be offered, and the telephone calls recorded from professionals also indicate work being carried out with other organisations. For the five-month period when the organisation represented by professionals telephoning the GLYSS project was recorded, it is evident that a number of different organisations were accessing the GLYSS project. Approximately the same percentage of contacts were made by professionals from Halton and Warrington, and in addition 24% of enquiries were made by people elsewhere in the United Kingdom. This indicates that the GLYSS service provided information to a wide variety of professionals working with young people.

The second area in which the GLYSS project aimed to have an impact in work with the Youth Service and other organisations concerned working with staff to develop policies for work with young lesbian, gay and bisexual people. As Nezlek and Galano (1993) state, there is an increased potential for 'coalitions', in the form of inter-agency projects for example, to influence policy making. There was some evidence that the GLYSS project has been able to feed into policy decisions, for example in the inclusion of the GLYSS

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project on the Sex Education Group that wrote a strategy for the delivery of sex education across Youth Services and Education in Halton and Warrington. However, the majority of professionals interviewed perceived that the GLYSS project has been less successful with this aim.

Understanding why this aim might not have been fully achieved is relevant to the evaluation of the GLYSS project. One important issue, an issue that was alluded to in the professionals' interviews, was that of the timescale. Policy development takes place over time, and the perception was that, in the short amount of time for which the GLYSS project has been operating, progress towards this aim could not have been more rapid. There are a number of facets to this that emerged from the interview material. Firstly, when the aims of the GLYSS project were originally formulated, it was envisaged that certain structures would be in place at the start, and this was not actually the case. For example, the initial problems with where the Development Worker would be based and how she would be 'line managed' could have delayed the start of any substantial work. In addition, the context in which the GLYSS project was operating was that of the review and restructuring of services associated with unitary authority status. This climate is arguably not one in which policy development is likely to flourish.

Conflicting agendas, an issue that emerged clearly from the professionals' interview material, were likely to play a role in developing policies. Unless people were working to the same agenda the chance of formulating a 'shared vision' underpinned by effective policies would seem slight. In this context, conflicting agendas can be understood in two ways. Firstly, it can be understood in terms of the priorities of the different agencies collaborating in the GLYSS project. Differing priorities would be likely to make policy development more difficult. Secondly, conflicting agendas can be understood in terms of the differing values likely to be held by the individuals involved in the GLYSS project. Bloxham (1996) argued that because of what she terms the 'controversial' field of sexual health, inter-agency work in this area is likely to face additional pressures, with greater need for shared values and mutual respect. It can be argued that this would be even more acute in the case of a project like GLYSS, due to the controversy that a project working with young lesbian, gay and bisexual people is likely to evoke, and is likely to have some impact on what was and was not achieved.

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As a result of these sorts of issues, the 'cultural' changes within agencies that were perceived by the professionals to be necessary in order to make a real difference to the way in which policies and procedures were formulated, have not taken place. It can be speculated, however, that the current national policy context, for example the emphasis on citizenship and anti-bullying in schools (Freeman, 2000; Smith, 2000), may be more supportive of such changes in the future.

In terms of the GLYSS project working with other agencies, the importance of the role of individuals was emphasized in the professionals' interview material. When considering the nature of inter-agency work, Delaney (1994) argued that 'coordinative' behaviour between individuals from different agencies cannot be adequately explained without taking into account interpersonal relationships. This was illustrated in the present study in two ways. The perceived skills of the GLYSS Development Worker were a crucial issue, and it was seen by the interviewees to be very important that she was enthusiastic about her work and could talk to professionals from any background in a calm and logical manner. Secondly, the importance of getting individuals with power in the decision making process 'on board' was often mentioned by the professionals interviewed. These two factors together were viewed as particularly 'enabling'.

Partnership working with other agencies is reported to be difficult to achieve, and this is evidenced in the present study by the limited work that the GLYSS project has been able to carry out with the Education Service. In this regard it is worthy of note that it was not possible to interview anyone from the Education sector for this evaluation. This may reflect the context within which the Education Service operates, for example, concerns over Section 28 of the Local Government Act. However, as outlined in Chapter 3, an Education Pilot Project has recently been initiated by the GLYSS Development Worker in conjunction with the Health Promotion Team and Healthy Schools Initiative, which indicates that progress is being made in this area.

Ultimately, it was planned that the work of the GLYSS project should become integrated into mainstream service provision and 'embedded'. The post of 'Development Worker' was a 'development' post, and the work that was initiated was intended to become self-sustaining. There are areas of the work where this has been achieved, for

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example the GLYSS Youth Group in Warrington is now run by the Youth Service. A slightly different example of integration can also be found in the professionals' interview material. The GLYSS project aimed to assist and support other agencies in dealing with young people's issues around sexuality, but it emerged that the project was able to support Youth and other services in more general ways. This could be important in terms of integrating the work of the project into mainstream service provision, as an arrangement which is beneficial to all parties concerned is more likely to succeed. It was evident from the professionals' interview material, however, that their perception was that if the GLYSS Development Worker post disappeared, issues around lesbian, gay and bisexual young people may slip off the agenda. This reflects the position that is often seen with inter-agency projects, in that they are much enhanced by having an individual to facilitate them (Scriven, 1995).

#### **6.4 The future for the work of the GLYSS project**

After the commencement of the GLYSS project, Cheshire became a unitary authority, and Halton and Warrington became independent Borough Councils. The future for the GLYSS project is now different in these two areas.

##### **6.4.1 The GLYSS project work in Halton**

In Halton, an SRB5 bid for five years funding for one full-time and one part-time worker on the GLYSS project was submitted in December 2000. It was subsequently announced that there was to be a delay in the distribution of this funding until September 2001. Consequently, there is no funding for the GLYSS Development Worker in Halton after the end of March 2001. The 'exit strategy' has thus been put into operation in Halton, with all of the training packages, the work that has been carried out around policy and strategy development, information about the work that has been carried out with the young people and all of the relevant paper work, being handed over to the agencies that have been part of the project. On 19th March 2001 a 'Declaration of Commitment to GLYSS' event was held. This involved managers from Halton Education Directorate, the Youth Service, Social Services, Health Promotion for North Cheshire, HITS (hope, inclusion, time, success - a charity working with young people), Halton YMCA and Halton Voluntary Action signing up to declare their services' commitment to the formation of a

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sexuality advisory group for Halton. A copy of this declaration can be seen in Appendix 5. It is a good demonstration of inter-agency collaboration at a strategic level.

#### **6.4.2 The GLYSS project work in Warrington**

In Warrington, the GLYSS project has been funded for a further year, until the end of March 2002. A plan of work for the year has been developed by a Warrington-based Management Group (Appendix 6), and is likely to involve investigating sources of funding in order to carry forward the post of Development Worker. At the end of the year, if no further money has emerged to fund the Development Worker post, the 'exit strategy' will be operated as in Halton. Thus, the training packages, the work that has been carried out around policy and strategy development, information about the work that has been carried out with the young people and all of the relevant paper work, will be handed over to the agencies that have been part of the project.

#### **6.5 Conclusion**

It is evident from the material presented in this report that the GLYSS project has achieved its aims of working with and supporting young lesbian, gay and bisexual people, and of working with the Youth Service and other organisations. The project is perceived as being innovative, well-structured and well-run, and work has been carried out around controversial issues without any adverse publicity. The project had less impact at a policy level, partly because of the timescale required to bring about the 'cultural' changes perceived to be necessary to sustain this area of work. Many of the barriers to the work of the project are well-documented areas of difficulty in inter-agency working (see, for example, Bloxham, 1996; Bloxham, 1997; Butterfoss et al, 1993; Nezlek and Galano, 1993), problems which, in this case, were compounded by the controversial nature of work around sexuality and young people in the context of Section 28. The tension between mainstream and specialist service provision has been evident. Due to the problematic nature of funding the GLYSS project as a specialist service, it is probable that unless the work becomes mainstream and time is allowed for cultural change to occur, issues around young lesbian, gay and bisexual people will not stay prominently on the agenda.

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Halton and Warrington Borough Councils are now proceeding with the work of the GLYSS project in different ways, and it would seem important for service providers in the Health, Education, Youth and Social Services to monitor what the effects of these arrangements are on work with young lesbian, gay and bisexual people, and to try to build on what has been achieved.

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## **Appendix 1**

### **Job description for the GLYSS Development Worker**

**WARRINGTON COMMUNITY HEALTH CARE (NHS) TRUST  
&  
CHESHIRE COUNTY COUNCIL YOUTH SERVICE**

**DEVELOPMENT WORKER: LESBIAN & GAY YOUTH**

(Salary scale A&C 6: 3 year contract  
Possible Job-Share or Secondment)

Funded for three years this innovative post seeks to enhance the emotional, mental and sexual health of young lesbian women and gay men in North Cheshire. The postholder will work with young people assessing and responding to the holistic health needs of young lesbian women and gay men, and with the Youth Service and other organisations for young people to discourage discrimination against young people on the grounds of their sexuality.

A commitment to and a good understanding of the health issues and needs of young lesbian women and gay men is essential. The postholder will also ideally have experience of Youth or Community work and hold a relevant qualification.

A regular motor vehicle user allowance is payable.

**WARRINGTON COMMUNITY HEALTH CARE (NHS) TRUST  
&  
CHESHIRE COUNTY COUNCIL YOUTH SERVICE**

**DEVELOPMENT WORKER: LESBIAN & GAY YOUTH**

(Salary scale A&C 6: 3 year contract  
Possible Job-Share or Secondment)

**JOB DESCRIPTION**

**HOURS OF WORK:** 37 Hours per week  
(flexible including evenings & weekends)

**ACCOUNTABLE TO:** Management Group

**JOB SUMMARY:**

**The two main aims of the project are:**

- 1) ***To establish contact with young lesbian women and gay men with the aims of:***
  - a) Assessing holistic health needs and empowering them as a group to address their expressed needs.
  - b) To enhance mental health, and support young lesbian women and gay men to develop the necessary skills, knowledge and understanding to devise appropriate responses to issues related to their own sexuality and sexual health.
- 2) ***To work with the Youth Service and other organisations to discourage discrimination against young people on the grounds of their sexuality.***
  - a) To work with agencies to assist and support them to advise and counsel young people on issues of sexuality.
  - b) To work with Youth Service staff and management to develop policies for work with young lesbian women and gay men.

## MAIN RESPONSIBILITIES:

- \* To make contact with young lesbian women and gay men in a range of settings with the aims of:
  - i) working with young lesbians and gay men to develop skills, knowledge and understanding in addressing their expressed needs, within the agreed framework of the Youth Service Curriculum.
  - ii) carrying out a small scale needs assessment of the holistic health needs of young lesbian women and gay men in North Cheshire.
- \* To work with the Youth Service and other agencies to devise methods of providing information about services, and using existing materials from Britain and abroad, together with feedback and the active collaboration of young lesbian women and gay men, to produce locally targeted information.
- \* To work with Youth Service staff and management to develop policies for work with young lesbian women and gay men.
- \* To develop resources that will enable the Youth Service and other organisations who work with young people to refer young lesbian women and gay men to appropriate services.
- \* In partnership with the Health Promotion Service, develop in-house training packages for The Youth Service and other organisations to address issues of: sexuality, heterosexism, homophobia and confidentiality.
- \* To regularly prepare and present reports on the work of the project to the steering/management group, and participate in the monitoring and evaluation of the project.
- \* To undertake any other duties deemed appropriate by the management committee.
- \* This is an outline job description and it is intended to serve as a basis for appointment. As a new post the duties and responsibilities will be subject to review and may be changed in accordance with service requirement/development.



**WARRINGTON COMMUNITY HEALTH CARE (NHS) TRUST  
&  
CHESHIRE COUNTY COUNCIL YOUTH SERVICE  
DEVELOPMENT WORKER: LESBIAN & GAY YOUTH**

**Presentation Task: Thursday 24 July 1997.**

**The presentation should last no longer than 15 minutes.**

**How would you identify, target and support young lesbian women and gay men?**

Please identify the approaches you would adopt. Within the presentation task demonstrate what potential barriers there may be that could prevent this work being carried out.

**Flip-charts and an Over Head Projector will be provided at the interview.**

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## **Appendix 2**

### **Data collection forms**

## Enquiry Record Young People

Date:

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[illegible][illegible]

## Date:

[illegible]

## Date:

Date:

[illegible]

**Tel/Fax: 01928 580270**



**The Bungalow  
Garven Place  
Warrington  
WA1 1GP  
01925 644204**

[illegible]

Working in Partnership  
North Cheshire Health  
Warrington Borough Council Youth and Social Services  
Halton Borough Council Youth and Social Services

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## **Appendix 3**

### **Definitions of categories of enquiry**

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|                        |   |
|------------------------|---|
| Support                | Someone to talk things through with, check out on right lines with, request support/help with achieving something                                       |
| Resources              | Info on books, leaflets, workpacks, mags, newsletters, posters, services available  |
| Law & Legal            | Police liaison support, legal issues, law and any changes, rights   |
| Training               | Delivery of training related to young people and sexuality issues   |
| Working group          | Info pertaining to, request for involvement in  |
| Client referral        | Referral of a young person to the service   |
| Service info           | Outline of what we do   |
| Working together       | Working together - request to work on a piece of work, get involved in a project, plan or participate in an event                                       |
| Coming out             | Telling parents, friends, family, careers, teachers, anyone...including planning, during, after event issues  |
| Mental health          | Mental illnesses, services, depression, anxiety, worry, info, leaflets etc., counselling  |
| Sexual health          | Services, signs of infection, contraceptives, pregnancy, info available, sexual relationships   |
| General health         | GPs, services, rights, ill-health   |
| Bullying/Homo          | Experiences of homophobia, bullying in school/work/home/public places   |
| Personal relationships | Relationship issues with 'partner(s)'   |
| Housing                | Family breakdown, homelessness, safety, possible home loss, info on services available, support in finding somewhere to stay e.g. night shelter, refuge |
| Youth group            | (y.g.) youth group, info, events, activities, issues about i.e. complaints, compliments   |
| Counselling            | Counselling service info/need for counselling   |
| 1 to 1                 | A service provided by GLYSS info about, access to   |

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## **Appendix 4**

### **GLYSS stakeholder interviews**

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## Example interview schedule

Introduction, purpose of interview.

### Theme 1      Operation of the Glyss project

- Can you tell me what your current post is and briefly what your responsibilities are?
- Can you tell me what your involvement with the GLYSS project is?
  - Member of management group.
  - How did you become a member, how long have you been on the group.
  - Role on management group.
  - Working of management group.
  - Any other involvement?
- The GLYSS project is an example of inter-agency working. Can you say anything about your experience of inter-agency working on this project?
  - Advantages and disadvantages?
  - What has worked well or not so well? Why?

### Theme 2      Reflecting on the GLYSS project

- Do you think that the GLYSS project has met its aims and objectives? (Prompt card).
    - Why?
    - How?
    - Can you give any examples to support these views?
    - Can you give any evidence to support these views?
  - Do you think that the GLYSS project has achieved anything, or had any effects, that were not originally intended or envisaged?
    - Can you give any examples?
    - Can you give any evidence?
  - From the point of view of your service, how successful has the GLYSS project been?
    - Has it met previously unmet need?
    - What have you gained from the GLYSS project?
    - Is there anything that you would like to have seen that has not happened?
  - Looking back, is there anything that you would have done differently?
  - What have you learned from your involvement with this project?
  - Is there anything else that you would like to say about the GLYSS project?
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## The 'stakeholder' interviewees

A cross section of individuals were approached to represent all of the services involved in the GLYSS inter-agency collaboration, members of the GLYSS Management Group, representatives from agencies who have worked with the GLYSS project on particular ventures, and parents of young people who have used the GLYSS project services. Fifteen semi-structured interviews were carried out with the following people:

- the GLYSS Development Worker;
  - 6 members of the GLYSS project Management Group;
  - 1 Youth Worker;
  - 5 individuals who have worked with the GLYSS project on particular topics or issues, or have a son or daughter who has been involved with the GLYSS project;
  - 2 Service Managers.
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## **Appendix 5**

### **Declaration of Commitment to GLYSS**



## Declaration of Commitment to Young Lesbian, Gay & Bisexual People in Halton



In support of the valuable work undertaken by GLYSS between October 1997 and April 2001 we, the undersigned, offer the commitment of our services to the continuation of this work. Our services are committed to the provision of support and recognition of the rights of young lesbian, gay and bisexual people in Halton. To ensure the needs of these young people remain visibly on the agenda we commit the time of a relevant member of staff from our service to meet regularly to specifically address these issues.

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Maggie Mooney



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Mary Milton



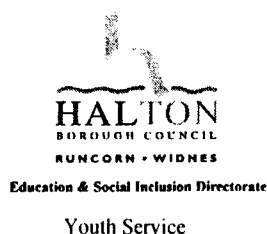
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Hazel Catt



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Sue Quinn



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Brian Charlton



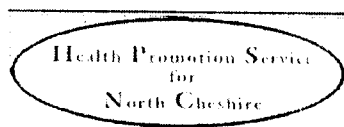
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David Atkinson



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Debbie Jackson



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## **Appendix 6**

### **GLYSS Warrington work plan**



## **GLYSS WARRINGTON WORK PLAN 2001-2002**

### **AIM**

To develop coherent local strategy and related policies for work with young lesbian, gay and bisexual people.

To build capability and capacity for future work, post 2002.

### **MAIN DUTIES**

- Develop a strategic sexuality group for Warrington
- Work with key service providers to inform the development of inclusive sexual health and equality policies.
- Provide strategic input in collaboration with Youth Service Management regarding the expansion and development of the GLYSS Youth Group.
- Negotiate the development and delivery of training with Youth Service Management.
- Develop and deliver training through the Health Promotion Service.
- Advise statutory service management regarding employment of a worker post 2002.
- Contribute to the development and dissemination of Sex and Relationships Guidance for schools, to include delivery of senior management training with schools where relevant.
- Have representation at relevant strategic meetings e.g. JSMG, Pink Network, including Police Liaison.
- Participate in planning Health Promotion Service Equal Opportunities Conference.
- Provide telephone direction/referral for local professionals regarding relevant services.
- Compile an archive on CD-rom of the projects work.

### **The Projects Key Achievements will be:**

- To consolidate the youth group within the Youth Service.
- To have developed and updated policy within key partner organisations.
- To develop and deliver agreed training packages with relevant partners for their staff.
- To disseminate / roll out learning from Education Pilot Project to all schools, including Sex and Relationships Guidance developed with Health Promotion Service.